

Status: Finalized

I. Center Identification

Organization Name: CENTRAL INDIANA ORTHOPEDIC SURGERY CENTER, LLC

Street Address: 3600 WEST BETHEL AVE

City: MUNCIE

County: DELAWARE

Administrator Name: KARLA HOSTETLER

Administrator Email: karla hostetler@ciocenter.com

ASC Web Address: www.ciocenter.com

Fiscal Year: 2013

Accredited: • Yes • No

Name of Accrediting Body: AAAHC

Deemed Status: O Yes O No

II. Identification of Surgical Resources

Number of operating rooms	2	
Number of procedure rooms	0	

III. Utilization Statistics

A. Total Patients and Procedures				
Time Period	Number of Patients	Number of Procedures		
Persons Served in twelve-month period	2,230	3,133		
B. Ten Most Frequent Surgical Procedures Performed				
CPT Code		Total Procedures		
62311		281		
29881		280		

64721	243
29826	157
64483	148
29827	129
29880	93
26055	92
64493	87
64494	74

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a	0
surgical encounter.	

Comments