



ASC Utilization Report
State Form 49933 (R3/6-05)
Indiana State Department of Health
Acute Care

Status: Finalized

I. Center Identification

Organization Name: CENTRAL INDIANA SURGERY CENTER

Street Address: 9002 N. Meridian St. Lower Level

City: Indianapolis

County: Marion

Administrator Name: Michelle Fall

Administrator Email: michellefall@cinsc.com

ASC Web Address:

Fiscal Year: 2014

Accredited: Yes No

Name of Accrediting Body: AAAHC

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

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	2024	3368
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	1087	

65756	511
66982	183
67036	118
66999	72
66986	66
65755	39
65710	39
65400	36
66825	29

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	2
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