



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

Status: Finalized

I. Center Identification

Organization Name: SURGERY CENTER OF CARMEL

Street Address: 12188A N. Meridian St Ste150

City: Carmel

County: Hamilton

Administrator Name: Maureen Chernoff

Administrator Email: mchernoff@scillc.md

ASC Web Address: thesurgeryofcarmel-indy.com

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	5
Number of procedure rooms	

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	5499	11697
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
43239	1231	

19325	591
45380	554
G8907	500
69436	384
G8916	356
58340	279
15879	281
30140	237
28285	224

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	8
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