



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 ORTHOPEDIC SURGERY CENTER, LLC

Street Address: 3600 WEST BETHEL AVE

City: MUNCIE

County: DELAWARE

Administrator Name: VICTOR MORAN

Administrator Email: victor_moran@ciocenter.com

ASC Web Address: www.ciocenter.com

Fiscal Year: 2015

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	2,123	3,719
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
64721	355	
29881	220	
62311	207	
64483	179	

29827	162
26055	150
64493	117
29826	108
29880	87
20680	72

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	1
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