



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

Status: Finalized

I. Center Identification

Organization Name: MEMORIAL SPINE & NEUROSCIENCE CENTER

Street Address: 100 Navarre Place, Suite 4405

City: South Bend

County: St. Joseph

Administrator Name: Cheri Sarasin

Administrator Email: csarasin@beaconhealthsystem.org

ASC Web Address: msncsurgery.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	2

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	865	2455
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
62311	778	
64486	247	
62310	116	
69990	76	

63030	65
22851	53
22551	42
22845	38
64721	30
64405	26

IV. Outcomes from Surgical Procedures

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