



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

Status: Finalized

I. Center Identification

Organization Name: NOVAMED SURGERY CENTER OF MERRILLVILLE, LLC

Street Address: 8514 Broadway

City: Merrillville

County: Lake

Administrator Name: Joyce Ball

Administrator Email: JBall@Williamseye.com

ASC Web Address: www.williamseye.com

Fiscal Year: 2016

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	1

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	2387	2409
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	1553	
66821	468	
66982	166	
65855	63	
0191T	49	
66711	38	
66761	23	

66183	13
66180	9
66999	27

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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