



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

Status: Finalized

I. Center Identification

Organization Name: MERIDIAN PLASTIC SURGERY CENTER

Street Address: 170 W. 106th St

City: Indianapolis

County: IN

Administrator Name: Meridian plastic Surgery Center

Administrator Email: mhuscroft@meridianplasticsurgerycenter.com

ASC Web Address: meridianplasticsurgeons.com

Fiscal Year: 2017

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	1244	3402
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
15820 blepharoplasty bilateral lower	60	
15847 excision excess skin	66	
15879 suction assisted lipectomy lower extremity	66	
15822 blepharoplasty bilateral upper	71	
15838 SML	73	
15828 Face Lift	87	
19316 mastopexy	91	

11310 shaving of epidermal or dermal lesion	95
15877 suction assisted lipectomy trunk	111
19325 mammoplasty augmentation with implant	157

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	13
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