



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

Status: Finalized

I. Center Identification

Organization Name: METRO SPECIALTY SURGERY CENTER

Street Address: 200 Missouri Ave Ste A

City: Jeffersonville

County: Clark

Administrator Name: Katie Arnold RN

Administrator Email: karnold@metrospecialty.com

ASC Web Address: www.metrospecialty.com

Fiscal Year: 2018

Accredited: Yes No

Name of Accrediting Body: Joint Commission

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	2524	8366
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
29881	242	
29827	191	
29826	169	
69436	114	
29822	107	
29806	85	
29888	79	

64721	74
27130	71
29916	62

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	2
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