



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

Status: Finalized

I. Center Identification

Organization Name: MOORESVILLE ENDOSCOPY CENTER, LLC

Street Address: 1215 Hadley Rd., Suite 101

City: Mooresville

County: Morgan

Administrator Name: Chandler Shirer

Administrator Email: chandler.shirer@franciscanalliance.org

ASC Web Address:

Fiscal Year: 2

Accredited: Yes No

Name of Accrediting Body: ACHC

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	0
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	2031	2184
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
45385	852	
45378	554	
45380	208	
G0105	172	
G0121	94	
45384	49	
43235	45	
43239	45	
46221	40	
45381	21	

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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