



## ASC Utilization Report

State Form 49933 (R3/6-05)

Indiana State Department of Health  
Acute Care

### I. Center Identification

*Organization Name:* INDIANA ORTHOPAEDIC SURGERY CENTER

*Street Address:* 5255 E Stop 11

*City:* Indianapolis

*County:* Marion

*ASC Web Address:* [www.orthoindy.com](http://www.orthoindy.com)

*Fiscal Year:* 2010

*Accredited:*  Yes  No

*Name of Accrediting Body:*

*Deemed Status:*  Yes  No

*Corporate Tax Status:*  For Profit  Non Profit

### II. Identification of Surgical Resources

Number of operating rooms	3
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	4570	6801
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
64483	902	
62311	469	
29881	462	
64493	364	
64479	348	
64721	307	
27096	301	

29877	190
64520	141
G0260	139

#### **IV. Outcomes from Surgical Procedures**

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	8
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