



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

Status: Finalized

I. Center Identification

Organization Name: TERRE HAUTE OUTPATIENT SURGERY CENTER

Street Address: 455 E Hospital Lane

City: Terre Haute

County: Vigo

Administrator Name: Primo A Andres

Administrator Email: pstephens@theheart.com

ASC Web Address:

Fiscal Year: 2013

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 | |
| 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 | 221 | 286 |
| B. Ten Most Frequent Surgical Procedures Performed | | |
| CPT Code | Total Procedures | |
| 93510 | 188 | |

| | |
|-------|----|
| 93526 | 19 |
| 75671 | 14 |
| 75724 | 5 |
| 75625 | 29 |
| c9600 | 8 |
| 75630 | 15 |
| C1760 | 8 |
| | |
| | |

IV. Outcomes from Surgical Procedures

| | |
|--|---|
| Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter. | 0 |
|--|---|