



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

Status: Finalized

I. Center Identification

Organization Name: INDIANA SURGERY CENTER - EAST

Street Address: 5445 E. 16th Street

City: Indianapolis

County: Marion

Administrator Name: Lori Walton

Administrator Email: LWalton@ecomunity.com

ASC Web Address:

Fiscal Year: 2023

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	7
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	9241	14732
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
64493	1901	
30140	1028	
66984	987	
64483	801	
64490	742	
64635	637	
20924	241	
47562	235	
20610	214	
69436	204	

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	23
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