



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

Status: Finalized

## I. Center Identification

Organization Name: SURGERY CENTER OF EYE SPECIALISTS OF INDIANA

Street Address: 1901 N. Meridian Street

City: Indianapolis

County: Marion

Administrator Name: Jennifer Knepp

Administrator Email: esisurgery1@gmail.com

ASC Web Address: eyespecialistsofindiana.com

Fiscal Year: 2014

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	2
Number of procedure rooms	0

## III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	7387	7387
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	4339	

66982	482
66821	2552
66761	14

#### 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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