



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

Status: Finalized

I. Center Identification

Organization Name: EYE SURGICAL CENTER OF FORT WAYNE

Street Address: 321 E. Wayne St

City: Fort Wayne

County: Indiana

Administrator Name: Amy Thiele

Administrator Email: athiele@eyecenteroffortwayne.com

ASC Web Address: www.drparent.com

Fiscal Year: 2015

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	2

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	1650	1400
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	679	
66821	622	
66982	217	
66850	25	

66999	19
66170	13
66711	12
65875	10
66740	9
67005	6

IV. Outcomes from Surgical Procedures

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