



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

Status: Finalized

I. Center Identification

Organization Name: INDIANA HAND TO SHOULDER

Street Address: 8501 Harcourt Road

City: Indianapolis

County: Marion

Administrator Name: Donna 'Kay' Hix

Administrator Email: dhix@iuhealth.org

ASC Web Address: na

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	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	3765	3764
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
20680	72	
25000	97	
25111	82	
25447	242	

26055	419
26123	59
26160	114
26860	56
64718	159
64721	872

#### IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	2
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