



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

Status: Finalized

I. Center Identification

Organization Name: SAXONY SURGERY CENTER

Street Address: 13100 E.136th St. Suite 1100

City: Fishers

County: Hamilton

Administrator Name: Traci Bowser

Administrator Email: [tbowser@iuhealth.org](mailto:tbowser@iuhealth.org)

ASC Web Address:

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	1715	1861
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
45385	198	
45380	144	
43239	105	
45378	88	

29881	72
64483	69
G0121	57
64721	54
62311	54
52356	46

#### 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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