



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

Status: Finalized

I. Center Identification

Organization Name: NAAB ROAD SURGERY CENTER, LLC

Street Address: 8260 Naab Road

City: Indianapolis

County: Marion

Administrator Name: John Keller

Administrator Email: jkeller@nrsc LLC.com

ASC Web Address:

Fiscal Year: 2016

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 | 6 |
| 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 | 7232 | 9463 |
| B. Ten Most Frequent Surgical Procedures Performed | | |
| CPT Code | Total Procedures | |
| 66984 | 830 | |
| 50590 | 271 | |
| 64483 | 255 | |
| 45378 | 239 | |
| 52332 | 222 | |
| 19120 | 216 | |
| 47563 | 203 | |

| | |
|-------|-----|
| 36561 | 186 |
| 19125 | 174 |
| 52356 | 168 |

IV. Outcomes from Surgical Procedures

| | |
|--|---|
| Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter. | 1 |
|--|---|