



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

Status: Finalized

I. Center Identification

Organization Name: CAPITOL STREET SURGERY CENTER

Street Address: 2007 N. Capitol Ave

City: Indianapolis

County: Indiana

Administrator Name: Brandon Ehret

Administrator Email: behret@capitolstreetsurgery.com

ASC Web Address: 2007 N. Capitol Ave

Fiscal Year: 2018

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	4
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	1138	1662
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
36902	418	
36907	297	
36903	167	

15877	163
19325	104
36596	94
36589	90
36906	79
36905	66
15830	61

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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