



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: IN

Administrator Name: Brandon Ehret

Administrator Email: behret@capitolstreetsurgery.com

ASC Web Address: 2007 N Capitol Ave

Fiscal Year: 2022

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	1814	2624
<b>B. Ten Most Frequent Surgical Procedures Performed</b>		
<b>CPT Code</b>	<b>Total Procedures</b>	
36902	982	
19325	176	
29827	111	
36903	97	
27447	84	
36905	74	
15830	70	
58558	69	
29881	64	
36581	56	

#### 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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