



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

Status: Finalized

I. Center Identification

Organization Name: INDIANA SKIN CANCER AMBULATORY SURGERY CENTER

Street Address: 701 E. County Line Rd, Suite 208

City: Greenwood

County: IN

Administrator Name: Michael Murphy

Administrator Email: murphymd1@gmail.com

ASC Web Address:

Fiscal Year: 2022

Accredited: Yes No

Name of Accrediting Body:

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	1
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	3468	3468
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
13132	893	
13121	677	
14061	399	
15260	354	
14041	337	
13101	291	
14060	176	
15220	8	
14021	9	
15240	34	

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	10
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