



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

Status: Finalized

I. Center Identification

Organization Name: NOVAMED SURGERY CENTER OF MERRILLVILLE, LLC

Street Address: 8514 Broadway

City: Merrillville

County: Lake

Administrator Name: Joyce Ball

Administrator Email: jball@williamseye.com

ASC Web Address: www.williamseye.com

Fiscal Year: 2020

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	2
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	1672	1896
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	1229	
66821	279	
66999	218	
66982	112	
65855	49	
0191T	5	
66761	3	

66850	3
65435	1
67010	1

#### IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	0
--	---