

Status: Finalized

I. Center Identification

Organization Name: GLEN LEHMAN ENDOSCOPY SUITE

Street Address: 550 University Blvd Suite 4100

City: Indianapolis

County: Marion

Administrator Name: Christian Rodgers

Administrator Email: crodgers1@iuhealth.org

ASC Web Address: N/A

Fiscal Year: 2023

Accredited: • Yes • No

Name of Accrediting Body: AAAHC

Deemed Status: O Yes O No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	0	
Number of procedure rooms	8	

III. Utilization Statistics

A. Total Patients and Procedures				
Time Period	Number of Patients	Number of Procedures		
Persons Served in twelve-month period	9433	13577		
B. Ten Most Frequent Surgical Procedures Performed				
CPT Code		Total Procedures		
45385		2332		
43239		1555		
43235		975		
45380		890		
45378		853		
43237		377		
43242		312		

43248	297
43270	208
43253	184

IV. Outcomes from Surgical Procedures

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