



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: 2023
 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	2952	3493
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	2194	
66999	520	
66821	469	
66982	219	
65855	72	
66991	7	
65820	7	
65435	2	
66761	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
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