



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

Status: Finalized

### I. Center Identification

Organization Name: SURGERY CENTER OF FORT WAYNE, LLC

Street Address: 1721 Magnavox Way, Suite A

City: Fort Wayne

County: Indiana

Administrator Name: Amanda Shew

Administrator Email: ashew@fortwaynesc.com

ASC Web Address: 1721 Magnavox Way, Suite A

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	2

### III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	4625	4686
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
64493	1057	
64494	1043	
64635	1039	
64636	1014	
64490	707	
64483	834	
64491	689	

G0260	546
64633	472
64634	460

#### IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	2
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