



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

Status: Finalized

I. Center Identification

Organization Name: IU HEALTH FORT WAYNE

Street Address: 4105 Dicke Rd

City: Fort Wayne

County: IN

Administrator Name: Sheila Turnbow

Administrator Email: sturnbow@iuhealth.org

ASC Web Address: <https://iuhealth.org/find-locations/iu-health-fort-wayne>

Fiscal Year: 2024

Accredited: Yes No

Name of Accrediting Body: Accreditation Association for Ambulatory Health Care

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

| | |
|---------------------------|---|
| Number of operating rooms | 4 |
| Number of procedure rooms | 5 |

III. Utilization Statistics

| A. Total Patients and Procedures | | |
|---------------------------------------|--------------------|----------------------|
| Time Period | Number of Patients | Number of Procedures |
| Persons Served in twelve-month period | 2907 | 3439 |

B. Ten Most Frequent Surgical Procedures Performed

| CPT Code | Total Procedures |
|-------------|------------------|
| 45378 | 719 |
| 15822-15823 | 371 |
| 49320 | 226 |
| 67040 | 205 |
| 15820-15821 | 146 |
| 17110 | 142 |
| 54150 | 85 |

| | |
|-------|----|
| 62311 | 62 |
| 68720 | 49 |
| 45100 | 46 |

IV. Outcomes from Surgical Procedures

| | |
|--|---|
| Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter. | 3 |
|--|---|