



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

Status: Finalized

### I. Center Identification

Organization Name: NORTHSIDE GASTROENTEROLOGY ENDOSCOPY CENTER

Street Address: 8424 Naab Road

City: Indianapolis

County: Marion

Administrator Name: Dean Lehmkuhler

Administrator Email: dlehmkuhler@amsurg.com

ASC Web Address: www.northsidegastro.com

Fiscal Year: 2024

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	0
Number of procedure rooms	4

### III. Utilization Statistics

#### A. Total Patients and Procedures

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	8656	11377

#### B. Ten Most Frequent Surgical Procedures Performed

CPT Code	Total Procedures
45385	4307
45380	2058
43239	2002
45378	1665
43450	547
G0105	273
43235	137

G0121	111
43251	101

#### IV. Outcomes from Surgical Procedures

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