



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