



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

Status: Finalized

### I. Center Identification

Organization: SURGERY ONE  
Name:

Street Address: 11420 Parkview Circle Dr.

City: Fort Wayne

County: Indiana

Administrator Name: Lisa house

Administrator Email: lisa.house@parkview.com

ASC Web Address: N/A

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	6
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	6770	10009

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

CPT Code	Total Procedures
64483	2013
64493	879
64721	729
64635	427
26055	310
64490	273
6026	254

27096	212
20610	200
29881	195

#### IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	9
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