

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

Status: Finalized

I. Center Identification

Organization Name: AMBUA	LTORY SURGERY CENTER FOR PAIN RELIEF LLC
Street Address:	2330 Lynch Rd Suite 100B
City:	Evansville
County:	Vanderburgh
Administrator Name:	Deborah J Turpen
Administrator Email:	debroehr@yahoo.com
ASC Web Address:	
Fiscal Year:	2013
Accredited:	●Yes ○No
Name of Accrediting Body:	
Deemed Status:	\odot Yes \bigcirc No
Corporate Tax Status:	● For Profit ○ Non Profit

II. Identification of Surgical Resources

Number of operating rooms	0
Number of procedure rooms	1

III. Utilization Statistics

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	2117	2117
B. Ten Most Frequent Surgical Procedures Performed CPT Code		Total Procedures

64493	785
64483	594
63650	18
62290	19
62310	13
62311	141
22520	4
22521	10

IV. Outcomes from Surgical Procedures

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

Comments

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