

Status: Finalized

## I. Center Identification

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	Nan	ne: BROA	DWEST	31 LCIAL	II SUK	GICAL	CLIVII	

Street Address: 315 W. 89th Avenue

City: Merrillville

County: Lake

Administrator Name: Angela Leach

Administrator Email: aleach@broadwestspecialty.com

ASC Web Address:

Fiscal Year: 2013

Accredited: • Yes ONo

Name of Accrediting Body: AAAHC

Deemed Status: OYes 

No

Corporate Tax Status: ● For Profit ○ Non Profit

## II. Identification of Surgical Resources

Number of operating rooms	4	
Number of procedure rooms	1	

## III. Utilization Statistics

A. Total Patients and Procedures				
Time Period	Number of Patients	Number of Procedures		
Persons Served in twelve-month period	2584	3045		
B. Ten Most Frequent Surgical Procedures Performed				
CPT Code		Total Procedures		
28285		278		

64483	207
62311	175
99070	143
64484	124
19325	84
17110	76
28296	75
29893	72
11750	68

## IV. Outcomes from Surgical Procedures

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

Comments