

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

Status: Finalized

I. Center Identification		
Organization Name: CLI SURGERY CENTER		
Street Address:	1601 W Lincoln Road	
City:	Kokomo	
County:	Howard	
Administrator Name:	Lori Hungate	
Administrator Email:	bdillon@cataractandlaserinstitute.com	
ASC Web Address:		
Fiscal Year:	2013	
Accredited:	●Yes ○No	
Name of Accrediting Body:	АААНС	
Deemed Status:	⊖Yes ●No	
Corporate Tax Status:	\odot For Profit \bigcirc Non Profit	

II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	1

III. Utilization Statistics

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	1318	2420
B. Ten Most Frequent Surgical Procedures Performed CPT Code		Total Procedures

66821	722
66982	177
65855	94
NCLRI	57
15823	34
66761	31
67010	5
67924	5
66250, 66840, 67900	3

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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