

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

Status: Finalized

I. Center Identification

Organization Name: INDIAN	APOLIS ENDOSCOPY CENTER, LLP
	8315 E. 56th Street, Suite 100
City:	Indianapolis
County:	Marion
Administrator Name:	Tamela White
Administrator Email:	twhite2@ecommunity.com
ASC Web Address:	communityendo.com
Fiscal Year:	2013
Accredited:	●Yes ○No

Name of Accrediting Body: AAAHC

Deemed Status: \bigcirc Yes \odot No

Corporate Tax Status: \bigcirc For Profit \bigcirc Non Profit

II. Identification of Surgical Resources

Number of operating rooms	0
Number of procedure rooms	4

III. Utilization Statistics

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	9176	10890
B. Ten Most Frequent Surgical Procedures Performed CPT Code		Total Procedures

43239	2373
45380	1694
G0105	810
G0121	796
45378	534
44361	494
43248	391
43235	192
43251	182

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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