

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

Status: Finalized

Center Identification	
	SPECIALTY SURGERY CENTER
Street Address:	200 Missouri Avenue
City:	Jeffersonville
County:	Clark
Administrator Name:	Lee Massey
Administrator Email:	leeamassey@metrospecialty.com
ASC Web Address:	
Fiscal Year:	2013
Accredited:	●Yes ○No
Name of Accrediting Body:	АААНС
Deemed Status:	⊖Yes ●No
Corporate Tax Status:	● For Profit ○ Non Profit

## II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	2

## **III.** Utilization Statistics

I.

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	2742	11078
B. Ten Most Frequent Surgical Procedures Performed CPT Code		Total Procedures

29826	175
29827	166
64490	133
64415	249
64447	146
64445	131
0232T	120
19380	127
30140	160

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following	3
a surgical encounter.	

Comments

< >