

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

Status: Finalized

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Organization Name: MICHIANA SURGERY CENTER LLC			
Street Address:	3212 Hickory Rd. Suite A		
City:	Mishawaka		
County:	St. Joseph		
Administrator Name:	Danielle Kertai		
Administrator Email:	danipainmgmnt@gmail.com		
ASC Web Address:			
Fiscal Year:	2013		
Accredited:	⊖Yes ●No		
Name of Accrediting Body:			
Deemed Status:	$\bigcirc$ Yes $\odot$ No		
Corporate Tax Status:	Tor Profit $\bigcirc$ Non Profit		

## II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	0

## **III. Utilization Statistics**

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	4	4
B. Ten Most Frequent Surgical		
Procedures Performed CPT Code		Total Procedures

62310	1
64493	1

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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