

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

Status: Finalized

I. Center Identification

Organization Name: SAXONY SURGERY CENTER		
Street Address:	13100 East 136'th Street Suite 1100	
City:	Fishers	
County:	Hamilton	
Administrator Name:	Lisa Clark, RN	
Administrator Email:	rclark9@iuhealth.org	
ASC Web Address:		
Fiscal Year:	2013	
Accredited:	●Yes ○No	
Name of Accrediting Body:	АААНС	
Deemed Status:	●Yes ○No	

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

## II. Identification of Surgical Resources

Number of operating rooms	4
Number of procedure rooms	1

## III. Utilization Statistics

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	941	1045
B. Ten Most Frequent Surgical Procedures Performed CPT Code		Total Procedures

43239	101
45378	74
45385	67
29881	30
69436	26
62311	23
29888	23
64721	22
43235	20

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following	1
a surgical encounter.	

Comments

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