

Status: Finalized

I. Center Identification

Organization Name: SOUTH BEND SPECIALTY SURGERY CENTER

Street Address: 335 Florence Ave.

City: Granger

County: St. Joseph

Administrator Name: Ralph Lantz

Administrator Email: rlantz@southbendspecialty.com

ASC Web Address:

Fiscal Year: 2013

Accredited: • Yes ONo

Name of Accrediting Body: AAAHC

Deemed Status: • Yes O 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

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	394	845
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code		Total Procedures
30930		71

69436	65
64721	50
31231	49
31267	28
30520	23
31254	18
31256	18
26160	16
31256	15

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following	2
a surgical encounter.	

Comments