

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

Status: Finalized

I. Center Identification	
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Organization Name: ADVANCED SURGERY CENTER, LLC				
Street Address:	1400 Teal Road			
City:	Lafayette			
County:	Indiana			
Administrator Name:				
Administrator Email:	asc@williamsoneyeinstitute.com			
ASC Web Address:	asc@williamsoneyeinstitute.com			
Fiscal Year:	2014			
Accredited:	$\bigcirc$ Yes $\bigcirc$ No			
Name of Accrediting Body:	Kristy Northcutt			
Deemed Status:	$\bigcirc$ Yes $\bigcirc$ No			

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

## II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	3

## **III. Utilization Statistics**

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	2731	2731
B. Ten Most Frequent Surgical Procedures Performed CPT Code		Total Procedures

66821	775
65855	294
66761	49
92499	38
65760	49
65756	5
67036	32
67228	17
67210	94

## IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following	0
a surgical encounter.	