

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

Status: Finalized

I. Center Identification

| Organization Name: BROADWEST SPECIALTY SURGICAL CENTER | | |
|-----------------------------------------------------------|-------------------------------|--|
| Street Address: | 315 W. 89th Avenue | |
| City: | Merrillville | |
| County: | Lake | |
| Administrator Name: | Angela Leach | |
| Administrator Email: | aleach@broadwestspecialty.com | |
| ASC Web Address: | | |
| Fiscal Year: | 2014 | |
| Accredited: | \odot Yes \bigcirc 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 | 2494 | 2962 |
| | | |
| | | |
| B. Ten Most Frequent Surgical Procedures Performed CPT Code | | Total Procedures |

| 64483 | 268 |
|-------|-----|
| 99070 | 191 |
| 64484 | 135 |
| 11750 | 127 |
| 62311 | 123 |
| 19325 | 111 |
| 28296 | 89 |
| 41899 | 82 |
| 17110 | 56 |

IV. Outcomes from Surgical Procedures

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