

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

Status: Finalized

I. Center Identification

Organization Name:	A SKIN CANCER AMBULATORY SURGERY CENTER
Street Address:	701 E County Line Rd Suit
City:	Greenwood
County:	IN
Administrator Name:	Michael Murphy
Administrator Email:	iscc701@gmail.com
ASC Web Address:	
Fiscal Year:	2014
Accredited:	●Yes ○No
Name of Accrediting Body:	CMS
Deemed Status:	\bigcirc Yes \bigcirc No
Corporate Tax Status:	\odot For Profit \bigcirc Non Profit

II. Identification of Surgical Resources

Number of operating rooms	1
Number of procedure rooms	1

III. Utilization Statistics

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	2983	2983
B. Ten Most Frequent Surgical Procedures Performed CPT Code		Total Procedures

13121	364
15260	325
13101	252
14060	268
14041	255
14061	214
13152	77
14040	114
15220	84

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following	7
a surgical encounter.	