



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

Status: Finalized

I. Center Identification

Organization Name: MICHIANA ENDOSCOPY CENTER LLC

Street Address: 53830 Generations Dr

City: South Bend

County: St Joseph

Administrator Name: Sally Zablocki

Administrator Email: szablocki@amsurg.com

ASC Web Address: www.michianaendo.com

Fiscal Year: 2014

Accredited: Yes No

Name of Accrediting Body: AAAHC

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	0
Number of procedure rooms	4

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	7918	8414
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
45385	2,357	

45378	1,508
43239	1,259
45380	1,198
43235	500
43248	370
G0105	248
G0121	225
43251	37
43255	13

IV. Outcomes from Surgical Procedures

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