

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

Status: Finalized

I. Center Identification

Organization Name: RETINA INSTITUTE OF INDIANA LLC		
Street Address:	11192 Diebold Rd.	
City:	Fort Wayne	
County:	Allen	
Administrator Name:	Brandi Berkhalter	
Administrator Email:	office@retinahome.com	
ASC Web Address:	N/A	
Fiscal Year:	2014	
Accredited:	●Yes ○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	1
Number of procedure rooms	1

III. Utilization Statistics

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	235	246
B. Ten Most Frequent Surgical Procedures Performed CPT Code		Total Procedures

67040	53
67108	25
67036	26
67042	30
67121	22

IV. Outcomes from Surgical Procedures

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