

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

Status: Finalized

I. Center Identification

Organization Name:		
Street Address:	1801 N. Senate Blvd STE D 1450	
City:	Indianapolis	
County:	Marion	
Administrator Name:	Donna 'Kay' Hix	
Administrator Email:	dhix@iuhealth.org	
ASC Web Address:	na	
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	8
Number of procedure rooms	2

III. Utilization Statistics

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	4244	4553
B. Ten Most Frequent Surgical Procedures Performed CPT Code		Total Procedures

64483	402
29881	149
62362	136
62310	130
27428	128
27096	120
64721	116
47562	112
63685	109

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following	6
a surgical encounter.	