



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

Status: Finalized

I. Center Identification

Organization Name: CENTER FOR SPECIAL SURGERY, LLC

Street Address: 8805 North Meridian Street

City: Indianapolis

County: Marion

Administrator Name: Amy Rice

Administrator Email: arice@indypain.com

ASC Web Address: www.indypain.com

Fiscal Year: 2015

Accredited:  Yes  No

Name of Accrediting Body:

Deemed Status:  Yes  No

Corporate Tax Status:  For Profit  Non Profit

II. Identification of Surgical Resources

Number of operating rooms	1
Number of procedure rooms	0

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	536	5309
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
64493	577	
64494	577	
64490	477	
64495	473	

64491	464
64492	423
62311	304
64635	248
64483	239
63650	218

#### IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	3
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