



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

Status: Finalized

I. Center Identification

Organization Name: CLEARVIEW EYE SURGERY CENTER

Street Address: 2020 S Clearview Drive

City: Vincennes

County: IN

Administrator Name: Chelsea Rodimel

Administrator Email: surgerycenter@2020clearview.com

ASC Web Address:

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	2
Number of procedure rooms	1

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	473	1057
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	381	
66821	280	
62311	75	
65855	64	

64483	56
20610	35
66982	30
64493	23
62310	17
63650	16

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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