



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

Status: Finalized

I. Center Identification

Organization Name: CARMEL AMBULATORY SURGERY CENTER, LLC

Street Address: 13421 OLD MERIDIAN STREET

City: CARMEL

County: HAMILTON

Administrator Name: CHARLOTTE BODEN

Administrator Email: cboden@carmelambulatory.com

ASC Web Address: www.carmelambulatory.com

Fiscal Year: 2016

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	6
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	5611	6414
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
36475	1425	
66984	1350	
62311	1156	
29880	372	
19325	251	
58558	243	
62310	213	

47562	198
69436	198
19318	168

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	2
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