



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: 2016

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	639	4850
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
62311	485	
64493	430	
64494	423	
64490	393	
64491	386	
64492	287	
64633	215	

64634	214
64635	211
64495	205

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	1
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