



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

Status: Finalized

I. Center Identification

Organization Name: DIGESTIVE HEALTH CENTER

Street Address: 1120 AAA Way

City: Carmel

County: IN

Administrator Name: Trish Robbins, RN, BSN

Administrator Email: trobbins@stoutdigestivecenter.com

ASC Web Address: www.stoutdigestivecenter.com

Fiscal Year: 2016

Accredited: Yes No

Name of Accrediting Body: Joint Commission, Medicare

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	2

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	1704	2011
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
43239	1528	
43248	929	
45378	856	
45385	808	
45380	546	
G0105	206	
45381	28	

43245	18
43250	2
43251	2

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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