



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

Status: Finalized

I. Center Identification

Organization Name: ST FRANCIS MOORESVILLE SURGERY CENTER

Street Address: 1215 Hadley Rd, Suite 100

City: Mooresville

County: Morgan

Administrator Name: Elaine Thomas

Administrator Email: elaine.thomas@franciscanalliance.org

ASC Web Address: stfrancismooresvillesurgerycenter.org

Fiscal Year: 2016

Accredited: Yes No

Name of Accrediting Body: HFAP

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 | 1613 | 2120 |
| B. Ten Most Frequent Surgical Procedures Performed | | |
| CPT Code | Total Procedures | |
| 45385 | 204 | |
| 45378 | 146 | |
| 45380 | 113 | |
| 64520 | 94 | |
| 46260 | 67 | |
| 64488 | 58 | |
| 52281 | 55 | |

| | |
|-------|----|
| 69436 | 54 |
| 46505 | 48 |
| 47562 | 46 |

IV. Outcomes from Surgical Procedures

| | |
|--|---|
| Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter. | 0 |
|--|---|