

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

Status: Finalized

I. Center Identification

Organization Name: INDIANA SURGERY CENTER - NOBLESVILLE Street Address: 9700 East 146th Street City: Noblesville County: Hamilton Administrator Name: Laura Edwards Administrator Email: ledwards2@ecommunity ASC Web Address: Fiscal Year: 2017

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	4
Number of procedure rooms	0

III. Utilization Statistics

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	4382	6125
B. Ten Most Frequent Surgical Procedures Perfe	ormed	
CPT Code		Total Procedures
66984		525
69436		429
42820		200
43239		171
36478		122
30140		120
64721		104

29881	101
42821	79
26055	71

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following	7
a surgical encounter.	