

Status: Finalized

#### I. Center Identification

Organization Name: FOOT & ANKLE SURGERY CENTER INC

Street Address: 8651 Township Line Road

City: Indianapolis

County: Marion

Administrator Name: Natalie Christy

Administrator Email: nchristy@ecommunity.com

ASC Web Address:

Fiscal Year: 2017

Accredited: • Yes • No

Name of Accrediting Body: AAAHC

Deemed Status: O 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

A. Total Patients and Procedures				
Time Period	Number of Patients	Number of Procedures		
Persons Served in twelve-month period	1589	2687		
B Ten Most Frequent Surgical Procedures Perform	ed			

CPT Code	Total Procedures
45384	476
45380	439
28285	333
43239	265
45385	87
11750	76
28296	73

45378	69
28104	54
28270	45

# IV. Outcomes from Surgical Procedures

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