



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

Status: Finalized

I. Center Identification

Organization Name: SAINT CHARLES SURGICAL PAVILION

Street Address: 1900 Saint Charles Street

City: Jasper

County: IN

Administrator Name: Erica Snell, RN

Administrator Email: esnell@norrisblessinger.com

ASC Web Address: www.norrisblessinger.com

Fiscal Year: 2018

Accredited: Yes No

Name of Accrediting Body: The Joint Commission

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	1981	2638
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
64483	322	
62323	279	
64721	149	
27095	124	
G0260	101	
29881	77	
64493	61	

27096	60
64448	52
26055	48

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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