

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

Status: Finalized

I. Center Identification

Organization Name: EVANSVILLE SURGERY CENTER/DEACONESS HOSPITAL CAMPUS Street Address: 520 Mary Street, Suite 130 City: Evansville County: Vanderburgh Administrator Name: Lana Seibert Administrator Email: LanaSeibert@evansvilleSurgeryCenter.com ASC Web Address: EvansvilleSurgeryCenter.com Fiscal Year: 2019 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	6
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	5364	6573	
B. Ten Most Frequent Surgical Procedures P	erformed		
CPT Code		Total Procedures	
66984		784	
47562		289	
69436		285	
66821		274	
50590		230	
52356		182	
52332		145	
43239		136	
49505		122	
42820		116	

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days	5
following a surgical encounter.	