

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

Status: Finalized

I. Center Identification

Organization Name: Street Address: 5255 E. Stop 11 Rd, Suite 100 City: Indianapolis County: Marion Administrator Name: Chandler Shirer Administrator Email: chandler.shirer@franciscanalliance.org ASC Web Address: Fiscal Year: 2019

Accredited: • Yes • No

Name of Accrediting AAAHC Body:

Deemed Status:

Yes
No

Corporate Tax Status:
 For Profit
 Non Profit

II. Identification of Surgical Resources

Number of operating rooms	8	
Number of procedure rooms	1	

III. Utilization Statistics

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	12404	18015
B. Ten Most Frequent Surgical Procedures P	Performed	
CPT Code		Total Procedures
45385		1261
45378		1074
66984		1017
69436		1012
64721		460

45380	357
26055	276
50590	252
G0105	222

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days	10
following a surgical encounter.	