



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

Status: Finalized

I. Center Identification

Organization Name: MOORESVILLE ENDOSCOPY CENTER, LLC

Street Address: 1215 Hadley Rd. Suite 101

City: Mooresville

County: Morgan

Administrator Name: Chandler Shirer

Administrator Email: chandler.shirer@franciscanalliance.org

ASC Web Address:

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	0
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	1801	1881
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
45385	512	
45378	504	
45384	201	
G0121	188	
45380	174	
G0105	80	

46221	68
43239	64
43235	61
43248	24

IV. Outcomes from Surgical Procedures

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