

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

Status: Finalized

I. Center Identification

Organization Name: MUNST	ER SPECIALTY SURGERY CENTER
Street Address:	9200 Calumet Ave S-100
City:	Munster
County:	Lake
Administrator Name:	Lauren Pries
Administrator Email:	lpries@munsterspecialty.com
ASC Web Address:	munsterspecialty.com
Fiscal Year:	2019

Accredited: \bigcirc Yes \bigcirc No

Name of Accrediting Body: AAAHC

Deemed Status: OYes ONo

Corporate Tax Status: O For Profit O Non Profit

II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	1

III. Utilization Statistics

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	1661	1661
B. Ten Most Frequent Surgical Procedures Perfe	ormed	
CPT Code		Total Procedures
27447		226
27130		194
29881		150
29888		112
23430		110
27446		88
29827		41

22551	40
29848	35
22633	22

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following	3
a surgical encounter.	