



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 St

City: Jasper

County: IN

Administrator Name: Erica Snell, RN

Administrator Email: esnell@norrisblessinger.com

ASC Web Address: www.norrisblessinger.com

Fiscal Year: 2019

Accredited: Yes No

Name of Accrediting Body: 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	1789	3667
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
64483	393	
62323	204	
64721	135	
64493	81	
26055	78	
27095	75	

29881	74
27096	61
27093	49
27447	45

IV. Outcomes from Surgical Procedures

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