



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

Status: Finalized

I. Center Identification

Organization Name: **ADVANCED SURGERY CENTER, LLC**
Street Address: 1400 TEAL ROAD, SUITE 7
City: LAFAYETTE
County: Indiana
Administrator Name: Robert Williamson
Administrator Email: ASC@WILLIAMSONEYEINSTITUTE.COM
ASC Web Address: 1400 TEAL ROAD
Fiscal Year: 2020
Accredited: Yes No
Name of Accrediting Body: AAAHC
Deemed Status: Yes No
Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	3

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	1946	1946
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	1052	
66821	578	
65855	106	
66982	50	
66761	22	
67228	11	
67210	16	

67036	19
65756	11
65426	4

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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