



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

Status: Finalized

I. Center Identification

Organization Name: CAPITOL STREET SURGERY CENTER

Street Address: 2007 N Capitol Ave

City: Indianapolis

County: Indiana

Administrator Name: Brandon Ehret

Administrator Email: behret@capitolstreetsurgery.com

ASC Web Address:

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	4
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	1626	2794
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
36902	1218	
36903	200	
36905	123	
36581	115	
36589	100	
19325	95	
15830	72	

29881	63
36558	57
29827	52

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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