

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

Status: Finalized

I. Center Identification

Organization Name: Street Address: 550 N University Ste 4100 City: Indianapolis County: Marion Administrator Name: Patrick Beaupre Administrator Email: pbeaupre@iuhealth.org ASC Web Address: Fiscal Year: 2020 Accredited: ● Yes ○ No

Name of Accrediting Body: AAAHC

Deemed Status: ⊙Yes ○No

Corporate Tax Status: O For Profit O Non Profit

II. Identification of Surgical Resources

Number of operating rooms	0
Number of procedure rooms	8

III. Utilization Statistics

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	6815	9912
B. Ten Most Frequent Surgical Procedures Perfo	ormed	
CPT Code		Total Procedures
45385		1465
43239		985
43235		866
45380		601
43259		427
43248		330
43242		303

45378	256
43253	224
43270	178

IV. Outcomes from Surgical Procedures

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