

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

Status: Finalized

I. Center Identification

Organization Name: MERIDIAN SOUTH SURGERY CENTER Street Address: 8830 S Meridian St, STE 250 City: Indianapolis County: Marion Administrator Name: Elizabeth D Gulley Administrator Email: egulley@iuhealth.org ASC Web Address: Fiscal Year: 2020 Accredited: Yes ONo

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	4
Number of procedure rooms	

III. Utilization Statistics

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	1552	1831
B. Ten Most Frequent Surgical Procedures Perfe	ormed	
CPT Code		Total Procedures
45385		208
45380		146
64721	21	
G0121		67
45378		57
64483		50
G0105		44

20680	43
64493	41
45388	36

IV. Outcomes from Surgical Procedures

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