



ASC Utilization Report

State Form 49933 (R3/6-05)

Indiana State Department of Health
Acute Care

I. Center Identification

Organization Name: NOVAMED PAIN MANAGEMENT OF NEW ALBANY, LLC

Street Address: 520 West First Street

City: New Albany

County: Floyd

ASC Web Address: www.Novamed.com

Fiscal Year: 2010

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	0

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	1293	1293
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
62311	858	
62310	287	
64493	70	
27096	37	
64520	7	
64483	13	
64490	14	

64479	5
63650	1
64510	1

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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