



ASC Utilization Report

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

I. Center Identification

Organization Name: SOUTH BEND CLINIC & SURGICENTER

Street Address: 211 N. Eddy St.

City: South Bend

County: St. Joseph

ASC Web Address: www.southbendclinic.com

Fiscal Year: 2011

Accredited: Yes No

Name of Accrediting Body:

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	5
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	6636	8457
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
45380	1328	
43239	952	
45385	828	
45378	618	
69436	371	
66984	320	
62311	172	

64493	168
42820	163
64483	161

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	1
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