



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

Status: Finalized

I. Center Identification

Organization Name: GOSHEN AMBULATORY CARE CENTER, LLC

Street Address: 1605 WINSTED DRIVE

City: GOSHEN

County: ELKHART

Administrator Name: DEBORAH STARNES

Administrator Email: DEBBIE@GACCLLC.COM

ASC Web Address:

Fiscal Year: 2013

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	2
Number of procedure rooms	2

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	1355	1355
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
62311	255	

50590	112
52332	101
66984	100
52005	90
52310	81
69436	68
52352	66
42820	57
42826	43

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	2
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Comments

