



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

Status: Finalized

I. Center Identification

Organization Name: LAKESIDE SURGERY CENTER, LLC

Street Address: 810 W. Chicago Ave.

City: East Chicago

County: Lake

Administrator Name: Romelson Almonte

Administrator Email: balmonte@lakesidesurgerycenter.com

ASC Web Address: Lakesidesuregerycenter.com

Fiscal Year: 2013

Accredited: Yes No

Name of Accrediting Body: Joint Commission

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	1

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	118	1248
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
77003	172	

20552	157
72275	155
62311	120
64493	68
64494	66
62290	48
64634	41
62310	41
64633	40

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	None
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Comments

