



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

Status: Finalized

I. Center Identification

Organization Name: SURGERY CENTER FOR PAIN OF SOUTHERN INDIANA

Street Address: 2920 McIntire Drive Suite 150

City: Bloomington

County: Monroe

Administrator Name: MaryAnn Jacobs, RN

Administrator Email: maryann.jacobsrn@gmail.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	1479	1557
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
G0260	393	

60490, 60491, 60492	390
64483, 64484	363
64493, 64494, 64495	349
64719, 64721, 25115	10
62311	9
64635, 64636	4
64520	3
64633, 64634	1
64530	1

IV. Outcomes from Surgical Procedures

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

Comments

