



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 OF OPHTHALMOLOGY CONSULTANTS

Street Address: 7232 Engle Road

City: Fort Wayne

County: Allen

Administrator Name: Douglas Miller

Administrator Email: dmiller@ophc.com

ASC Web Address: www.ophc.com

Fiscal Year: 2013

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 | 1 |

III. Utilization Statistics

| A. Total Patients and Procedures | | |
|--|--------------------|----------------------|
| Time Period | Number of Patients | Number of Procedures |
| Persons Served in twelve-month period | 1515 | 1515 |
| B. Ten Most Frequent Surgical Procedures Performed | | |
| CPT Code | Total Procedures | |
| 66984 | 1007 | |
| 66821 | 279 | |

| | |
|-------|----|
| 66982 | 96 |
| 65855 | 78 |
| 66761 | 59 |
| 65222 | 52 |
| 67145 | 45 |
| 65205 | 30 |
| 67228 | 14 |
| 67311 | 12 |

IV. Outcomes from Surgical Procedures

| | |
|--|---|
| Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter. | 7 |
|--|---|