



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

Status: Finalized

I. Center Identification

Organization Name: VALLEY SURGERY CENTER

Street Address: 220 E VIRGINIA STREET

City: EVANSVILLE

County: VANDERBURGH

Administrator Name: MICHELLE HODOVOL

Administrator Email: MICHELLE.HODOVOL@COVENANTSP.COM

ASC Web Address:

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	2915	3205
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66821	350	

67108	85
67036	70
67042	57
66761	55
67041	53
67113	50
66982	35
67039	25
65756	19

IV. Outcomes from Surgical Procedures

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

