



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

Status: Finalized

I. Center Identification

Organization Name: CLEARVIEW EYE SURGERY CENTER

Street Address: 2020 Clearview Drive

City: Vincennes

County: Knox

Administrator Name: Laurie Reid

Administrator Email: lreid@2020clearview.com

ASC Web Address: surgerycenter@2020clearview.com

Fiscal Year: 2014

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	1

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	327	480
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	261	

66821	167
65855	25
66999	23
67010	4

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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