



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

Status: Finalized

I. Center Identification

Organization Name: HAMMOND COMMUNITY AMBULATORY CARE CENTER

Street Address: 2143 Calumet Avenue

City: Whiting

County: IN

Administrator Name:

Administrator Email: BHARATIPATEL52@YAHOO.COM

ASC Web Address: BHARATIPATEL52@YAHOO.COM

Fiscal Year: 2014

Accredited:  Yes  No

Name of Accrediting Body: HFAP

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	169	183
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
45378	44	

11043	9
43235	8
49507	7
14001	6
43239	6
47562	6
49561	6
12032	5
14000	5

#### 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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