



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

Status: Finalized

I. Center Identification

Organization Name: EYE SURGICAL CENTER OF FORT WAYNE

Street Address: 321 E. Wayne St

City: Fort Wayne

County: Indiana

Administrator Name: Amy Thiele

Administrator Email: athiele@eyecenteroffortwayne.com

ASC Web Address: www.drparent.com

Fiscal Year: 2016

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	1914	2355
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	899	
66821	695	
S9986	374	
66982	165	
65855	62	
65875	18	
66999	16	

66740	16
66170	15
66850	14

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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