



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

Status: Finalized

I. Center Identification

Organization Name: INDIANAPOLIS ENDOSCOPY CENTER, LLP

Street Address: 8315 E. 56th Street, Suite 100

City: Indianapolis

County: Marion

Administrator Name: Tamela Richardson

Administrator Email: trichardson2@ecommunity.com

ASC Web Address: www.communityendo.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	0
Number of procedure rooms	4

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	11436	13528
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
43239	3918	
45380	3576	
45385	2712	
G0105	942	
G0121	889	
45378	525	
44361	295	

43235	278
43248	143
45381	43

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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