



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

Status: Finalized

I. Center Identification

Organization Name: SURGERY CENTER OF CARMEL
Street Address: 12188A N. Meridian St Ste.150
City: Carmel
County: Hamilton
Administrator Name: Maureen Chernoff
Administrator Email: mchernoff@scillc.md
ASC Web Address: Thesurgerycenterofcarmel.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	6
Number of procedure rooms	0

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	6046	11608
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
43239	1326	
19325	655	
69436	564	
45380	519	
G8907	496	
G8916	435	
58340	272	

55700	232
30520	217
19316	209

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	6
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