



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

Status: Finalized

I. Center Identification

Organization Name: INDIANA SURGERY CENTER - NORTH

Street Address: 8040 Clearvista Pkwy Suite 150

City: Indianapolis

County: Marion

Administrator Name: Marci Jones

Administrator Email: mjones@ecomunity.com

ASC Web Address:

Fiscal Year: 2018

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	9
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	11309	17147
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
14301	952	
64493	716	
30140	653	

19301	571
58558	466
15777	451
69436	445
58563	329
64635	303
62323	282

## IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	18
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