



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

Status: Finalized

I. Center Identification

Organization Name: EAGLE HIGHLANDS SURGERY CENTER, L.L.C.

Street Address: 6850 Parkdale Place

City: Indianapolis

County: Marion

Administrator Name: Elizabeth D. Gulley

Administrator Email: egulley@iuhealth.org

ASC Web Address: na

Fiscal Year: 2019

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	4
Number of procedure rooms	2

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	5522	7065
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
45380	742	
45378	650	
66984	414	
45385	282	
G0121	215	
62323	203	
29827	173	

64483	167
43239	164
64721	117

#### IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	1
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