



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

Status: Finalized

I. Center Identification

Organization Name: RETINA INSTITUTE OF INDIANA LLC
Street Address: 11192 Diebold Road
City: Fort Wayne
County: Indiana
Administrator Name: Jackie Dayton
Administrator Email: jackie.dayton@retinainstituteofindiana.net
ASC Web Address: 11192 Diebold Road
Fiscal Year: 2020
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 | 1 |
| 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 | 193 | 193 |
| B. Ten Most Frequent Surgical Procedures Performed | | |
| CPT Code | Total Procedures | |
| 67041 | 73 | |
| 67040 | 24 | |
| 67108 | 24 | |
| 67042 | 23 | |
| 67113 | 20 | |
| 67121 | 17 | |
| 67036 | 8 | |

| | |
|-------|---|
| 66852 | 4 |
| | |
| | |

IV. Outcomes from Surgical Procedures

| | |
|--|---|
| Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter. | 0 |
|--|---|