



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

Status: Finalized

I. Center Identification

Organization Name: INDIANA HAND TO SHOULDER

Street Address: 8501 Harcourt Road

City: Indianapolis

County: Marion

Administrator Name: David Kogan

Administrator Email: dkogan@iuhealth.org

ASC Web Address:

Fiscal Year: 2024

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	3
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	4085	4957

B. Ten Most Frequent Surgical Procedures Performed

CPT Code	Total Procedures
64721	501
64718	398
26055	392
29848	345
25447	196
26160	113
26123	112

25111	96
20680	87
25000	84

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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