



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

Status: Finalized

I. Center Identification

Organization Name: MICHIANA SURGERY CENTER LLC
 Street Address: 3212 Hickory Rd. Ste. A
 City: MISHAWAKA
 County: St. Joseph
 Administrator Name: Christina Blazier, RN
 Administrator Email: cblazier@michianasurgery.com
 ASC Web Address: <https://apacpain.com/locations/michiana-surgery-cc>
 Fiscal Year: 2024

Accredited: Yes No
 Name of Accrediting Body: Joint Comission
 Deemed Status: Yes No
 Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	2
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	697	2318
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
64483	289	
64493	174	
64494	165	
62323	147	
63650	140	
64484	133	
0275T	124	

G0260	119
64636	114
62321	104

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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