



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

Status: Finalized

I. Center Identification

Organization Name: CARMEL SPECIALTY SURGERY CENTER LLC

Street Address: 11590 N. Meridian St.

City: Carmel

County: Hamilton

Administrator Name: Tracy Goodin Hankins

Administrator Email: tgoodin@carmelspecialty.com

ASC Web Address: carmelspecialty.com

Fiscal Year: 2014

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	2
Number of procedure rooms	1

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	1960	6166
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
69436	531	

69990	344
76942	209
64721	201
64415	168
30140	138
29826	105
26055	99
15823	97
30520	95

#### IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	2
--	---