



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

Status: Finalized

I. Center Identification

Organization Name: INDIANAPOLIS ENDOSCOPY CENTER, LLP

Street Address: 8315 E 56th Street, Suite 100

City: Indianapolis

County: Marion

Administrator Name: Tamela Richardson

Administrator Email: trichardson2@ecomunity.com

ASC Web Address: www.communityendo.com

Fiscal Year: 2015

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	0
Number of procedure rooms	4

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	10,861	12,695
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
43239	3629	
45380	3078	
45385	2496	
G0105	936	

G0121	836
45378	567
44361	349
43235	322
43248	248
43251	30

#### IV. Outcomes from Surgical Procedures

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