



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

Status: Finalized

I. Center Identification

Organization Name: MUNCIE AMBULATORY SURGICENTER

Street Address: 200 N TILLOTSON AVENUE

City: MUNCIE

County: DELAWARE

Administrator Name: SYLVIA MCGLOTHAN

Administrator Email: SYLVIA\_MCGLOTHAN@AHNI.COM

ASC Web Address:

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	2
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	2275	2414
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	1393	
66921	300	
66982	75	
67917	62	

67904	60
67145	52
67228	49
15823	37
67210	37
67950	33

#### 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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