



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

Status: Finalized

I. Center Identification

Organization Name: SOUTH BEND SPECIALTY SURGERY CENTER

Street Address: 335 Florence Ave

City: Granger

County: St. Joseph

Administrator Name: Ralph Lantz

Administrator Email: rlantz@southbendspecialty.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	748	1798
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
31231	198	
69436	189	
30930	113	
64721	87	

28285	57
42820	49
30520	47
42821	29
31238	28
20926	25

#### 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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