



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

Status: Finalized

I. Center Identification

Organization Name: CENTRAL INDIANA SURGERY CENTER  
Street Address: 9002 North Meridian Street, Lower Level  
City: Indianapolis  
County: IN  
Administrator Name: Vickie McCullough  
Administrator Email: vickiemccullough@cinsc.com  
ASC Web Address:  
Fiscal Year: 2016

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	0

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	2145	2675
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	1147	
65756	502	
66982	175	
67036	116	
66710	80	
66999	79	
66986	63	

66825	60
65730	37
65710	35

#### IV. Outcomes from Surgical Procedures

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