



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

Status: Finalized

I. Center Identification

Organization Name: LAPORTE MEDICAL GROUP SURGICAL CENTER

Street Address: 900 I Street Suite #1

City: LaPorte

County: IN

Administrator Name: Melody McShane

Administrator Email: mmcshane@nueterra.org

ASC Web Address:

Fiscal Year: 2017

Accredited: Yes No

Name of Accrediting Body: Joint commission

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 | 1935 | 1960 |
| B. Ten Most Frequent Surgical Procedures Performed | | |
| CPT Code | Total Procedures | |
| 64483 | 231 | |
| 45385 | 192 | |
| 45378 | 161 | |
| 43239 | 148 | |
| 64484 | 120 | |
| 45380 | 86 | |
| 66984 | 73 | |

| | |
|-------|----|
| 67904 | 73 |
| 99070 | 72 |
| v2632 | 64 |

IV. Outcomes from Surgical Procedures

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