



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 22
City: Indianapolis
County: IN
Administrator Name: Vickie McCullough
Administrator Email: vickiemccullough@cinsc.com
ASC Web Address:
Fiscal Year: 2017
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	2238	4078
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
66984	1235	
65756	497	
V27785	438	
V2788	310	
C9447	308	
V2787	271	
66982	156	

66999	117
67306	77
66986	57

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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