

Status: Finalized

I. Center Identification

Organization Name: GLEN LEHMAN ENDOSCOPY SUITE

Street Address: 550 N University Blvd

City: Indianapolis

County: Marion

Administrator Name: Tiffany Robitaille

Administrator Email: trobitaille@iuhealth.org

ASC Web Address:

Fiscal Year: 2018

Accredited: • Yes • No

Name of Accrediting Body: AAAHC

Deemed Status: O Yes No

Corporate Tax Status: • For Profit • Non Profit

II. Identification of Surgical Resources

Number of operating rooms	
Number of procedure rooms	10

III. Utilization Statistics

A. Total Patients and Procedures				
Time Period	Number of Patients	Number of Procedures		
Persons Served in twelve-month period	8014	11723		
B. Ten Most Frequent Surgical Procedures Performed				

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CPT Code	Total Procedures	
45385	1704	
43239	1058	
43235	798	
43259	653	
45380	632	
43242	444	
45378	319	

43248	282
43253	234
43270	228

IV. Outcomes from Surgical Procedures

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