

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

Status: Finalized

## I. Center Identification

Organization Name: SURGERY CENTER OF OPHTHALMOLOGY CONSULTANTS Street Address: 7232 Engle Road City: Fort Wayne County: Allen Administrator Name: Douglas Miller Administrator Email: dmiller@ophc.com ASC Web Address: www.ophc.com Fiscal Year: 2018

Accredited: • Yes • No

Name of Accrediting Body: AAAHC

Deemed Status: OYes No

Corporate Tax Status: • For Profit • Non Profit

## II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	1

## **III.** Utilization Statistics

Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	962	2264
B. Ten Most Frequent Surgical Procedures Perfe	ormed	
CPT Code		Total Procedures
66984		1389
66821		558
66982		165
66761		88
65855		35
67228		13
67210		11

15823	2
66985	1
67917	1

## IV. Outcomes from Surgical Procedures

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