

Status: Finalized

I. Center Identification

Organization Name: CARMEL AMBULATORY SURGERY CENTER	R, LLC
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Street Address: 13421 Old Meridian St

City: Carmel

County: IN

Administrator Name: Sharon Snouffer

Administrator Email: ssnouffer@carmelambulatory.com

ASC Web Address: www.carmelambulatory.com

Fiscal Year: 2020

Accredited: • Yes O No

Name of Accrediting Body: AAAHC

Deemed Status: OYes ONo

Corporate Tax Status: OFor Profit ONon Profit

II. Identification of Surgical Resources

Number of operating rooms	6	
Number of procedure rooms	1	

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures

Persons Served in twelve-month period	5049	7370	
B. Ten Most Frequent Surgical Procedures Performed			
CPT Code		Total Procedures	
66984		1471	
36475		619	
62323		461	
58558		300	
19318		254	
19325		221	
66982		212	
37766		159	
46260		153	
15847		141	

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following	3
a surgical encounter.	