

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

Status: Finalized

I. Center Identification

Organization Name: IU HEALTH FORT WAYNE

Street Address: 4105 Dicke Road

City: Fort Wayne

County: Allen

Administrator Name: Sheila Turnbow

Administrator Email: sturnbow@iuhealth.org

ASC Web Address: https://iuhealth.org/find-locations/iu-health-fort-wayi

Fiscal Year: 2021

Accredited:  $\bigcirc$  Yes  $\bigcirc$  No

Name of Accrediting Body: Accreditation Association for Ambulatory Health Ca

Deemed Status: • Yes ONo

Corporate Tax Status: • For Profit O Non Profit

## II. Identification of Surgical Resources

| Number of operating rooms | 4 |
|---------------------------|---|
| Number of procedure rooms | 5 |

## III. Utilization Statistics

| A. Total Patients and Procedures |                    |                         |  |
|----------------------------------|--------------------|-------------------------|--|
| Time Period                      | Number of Patients | Number of<br>Procedures |  |
|                                  |                    |                         |  |

| Persons Served in twelve-month period              | 22 28            |
|--|------------------|
| B. Ten Most Frequent Surgical Procedures Performed |                  |
| CPT Code   | Total Procedures |
| 15830  | 5                |
| 19325  | 3                |
| 19318  | 3                |
| 15876  | 2                |
| 15822  | 1                |
| 19316  | 1                |
| 11200  | 1                |
| 19371  | 1                |
| 28750  | 1                |
| 28285  | 1                |

## IV. Outcomes from Surgical Procedures

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