



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

Status: Finalized

I. Center Identification

Organization Name: INDIANA SKIN CANCER AMBULATORY SURGERY CENTER

Street Address: 701 E County Line Road, Suite 208

City: Greenwood

County: IN

Administrator Name: Michael Murphy

Administrator Email: murphymd1@gmail.com

ASC Web Address:

Fiscal Year: 2020

Accredited: Yes No

Name of Accrediting Body:

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	1
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	3283	3548
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
13132	1018	
13121	691	
15260	331	
13101	304	
14060	289	
14041	244	
15220	104	

13152	57
14021	54
15240	48

IV. Outcomes from Surgical Procedures

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