



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

Status: Finalized

I. Center Identification

Organization Name: MOORESVILLE ENDOSCOPY CENTER, LLC

Street Address: 1215 Hadley Rd, Suite 101

City: Mooresville

County: Morgan

Administrator Name: Chandler Shirer

Administrator Email: chandler.shirer@franciscanalliance.org

ASC Web Address:

Fiscal Year: 2020

Accredited:  Yes  No

Name of Accrediting Body: HFAP

Deemed Status:  Yes  No

Corporate Tax Status:  For Profit  Non Profit

II. Identification of Surgical Resources

Number of operating rooms	0
Number of procedure rooms	2

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	1505	1708
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
45385	557	
45378	457	
45380	150	
G0105	148	
G0121	75	
45384	53	
46221	50	

43235	38
45381	31
43239	28

#### 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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