



## ASC Utilization Report

State Form 49933 (R3/6-05)

Indiana State Department of Health  
Acute Care

### I. Center Identification

*Organization Name:* HANCOCK SURGERY CENTER

*Street Address:* One Memorial Square, Suite 1000

*City:* Greenfield

*County:* Hancock

*ASC Web Address:* HancockSurgeryCenter.com

*Fiscal Year:* 2011

*Accredited:*  Yes  No

*Name of Accrediting Body:* AAAHC

*Deemed Status:*  Yes  No

*Corporate Tax Status:*  For Profit  Non Profit

### II. Identification of Surgical Resources

Number of operating rooms	4
Number of procedure rooms	0

### III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	4353	4353
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
45385	522	
43239	442	
45378	388	
69436	171	
45380	143	
62311	141	
69641	129	

64483	103
29881	101
64721	99

#### **IV. Outcomes from Surgical Procedures**

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	6
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