



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

Status: Finalized

I. Center Identification

Organization Name: EVANSVILLE SURGERY CENTER, GATEWAY

Street Address: 4133 Gateway Blvd. Suit 100

City: Newburgh

County: Warrick

Administrator Name: Cathy Head

Administrator Email: CathyHead@EvansvilleSurgeryCenter.com

ASC Web Address: www.EvansvilleSurgeryCenter.com

Fiscal Year: 2014

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	5
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	4222	6345
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
29881	358	

69436	257
29826	212
64721	205
29822	197
20610	183
64493	175
47562	168
29827	133
58670	125

#### IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	9
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