



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

Status: Finalized

I. Center Identification

Organization Name: GLEN LEHMAN ENDOSCOPY SUITE

Street Address: 550 N. University Blvd

City: Indianapolis

County: Marion

Administrator Name: Sharon K Niese

Administrator Email: sniese@juhealth.org

ASC Web Address:

Fiscal Year: 2014

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	0
Number of procedure rooms	10

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	6619	9730
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
45385	1141	

43239	894
45380	756
43259	724
45378	601
43235	456
43242	379
43248	307
43244	138
45341	100

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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