



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

Status: Finalized

I. Center Identification

Organization Name: MERIDIAN PLASTIC SURGERY CENTER

Street Address: 170 WEST 106TH sTREET

City:

County:

Administrator Name: Joann Jones, RN

Administrator Email: joannj@indy.rr.com

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	2
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	1165	3200
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
15828	119	

19316	98
15820	90
11310	88
19325	86
15822	81
30465	79
15838	75
15877	70
15830	68

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	13
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