



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

Status: Finalized

I. Center Identification

Organization Name: SURGERY CENTER PLUS

Street Address: 7430 N. Shadeland Ave

City: Indianapolis

County:

Administrator Name: Deanna M. McAllister

Administrator Email: deanna.mcallister@covenantssp.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	3
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	2760	3346
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
45385	554	

G0121	429
45380	345
45378	302
G0105	261
91122	148
91120	93
51784	85
46040	71
76872	70

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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