I. Center Identification

Organization Name: IU HEALTH EAST WASHINGTON ST AMBULATORY SURG

Street Address: 9660 E. Washington St. STE 200
City: Indianapolis
County: Marion

Administrator Name: E. DeAnn Gulley
Administrator Email: egulley@iuhealth.org
ASC Web Address: na
Fiscal Year: 2017

Accredited: Yes
Name of Accrediting Body: AAAHC
Deemed Status: Yes
Corporate Tax Status: For Profit

II. Identification of Surgical Resources

| Number of operating rooms | 4 |
| Number of procedure rooms | 1 |

III. Utilization Statistics

A. Total Patients and Procedures

<table>
<thead>
<tr>
<th>Time Period</th>
<th>Number of Patients</th>
<th>Number of Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Persons Served in twelve-month period</td>
<td>1425</td>
<td>1600</td>
</tr>
</tbody>
</table>

B. Ten Most Frequent Surgical Procedures Performed

<table>
<thead>
<tr>
<th>CPT Code</th>
<th>Total Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>64483</td>
<td>173</td>
</tr>
<tr>
<td>64635</td>
<td>118</td>
</tr>
<tr>
<td>63685</td>
<td>85</td>
</tr>
<tr>
<td>45385</td>
<td>80</td>
</tr>
<tr>
<td>62323</td>
<td>69</td>
</tr>
<tr>
<td>64493</td>
<td>65</td>
</tr>
<tr>
<td>G0121</td>
<td>55</td>
</tr>
</tbody>
</table>
### IV. Outcomes from Surgical Procedures

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.</td>
<td>1</td>
</tr>
</tbody>
</table>