Alabama Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	C3703	A. BUILDING _____ B. WING _____	07/28/2011

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PLANNED PARENTHOOD OF ALABAMA, INC	1211 27TH PLACE SOUTH BIRMINGHAM, AL 35205

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L 100	ALABAMA LICENSURE DEFICIENCIES THE FOLLOWING ARE LICENSURE DEFICIENCIES AND REQUIRE A PLAN OF CORRECTION. This Rule is not met as evidenced by: 420-5-1-.02 (8) Records and Reports. (a) Medical Records to be kept. An abortion facility shall keep adequate records, including procedure schedules, histories, results of examinations, nurses' notes, records of tests performed and all forms required by law. This rule is not met as evidence by: Based on record review and an interview with Employee Identifier (EI) # 1, Clinic Manager, the abortion center failed to assure the discharge order from the recovery room was signed by the physician for 1 of 28 records reviewed. This affected Patient Identifier (PI) #178882. Findings include: The record for PI # 178882 was reviewed on 7/27/11. The "Recovery Room" form for discharge from the clinic failed to have the signature of the physician that preformed the surgical abortion on 3/09/11. On 7/28/11 at 8:15 AM, EI # 1, the Clinic Manager, was interviewed and shown the "Recovery Room" form and the blank signature line for the physician. EI # 1 stated she just discovered this document was not signed and had placed the file in the physician's box to be signed.	L 100		

Health Care Facilities

TITLE (X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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L 100	Continued From page 1 420-5-1-.03 (6) Post Operative Procedures. (a) Post Operative Observation. After an abortion procedure, patients shall be observed until a determination can be made whether any immediate post operative complications are present. Patients shall either be discharged within twelve hours of admission in an ambulatory condition without need for further observation or acute care, or shall be offered transportation to a local hospital for further treatment. A physician must remain on the premises until all patients are discharged. The discharge order must be signed by the physician. This rule is not met as evidence by: Based on record review and an interview with Employee Identifier (EI) # 1, Clinic Manager, the clinic failed to assure that all patients received discharge instructions. This affected 1 of 28 records reviewed. Findings include: The record for Patient Identifier (PI) # 181775 was reviewed on 7/26/11. A review of the "Recovery Room" form dated 5/18/11 revealed there were no discharge instructions given to PI # 181775. On 7/28/11 at 8:15 AM, EI # 1, the Clinic Manager, was interviewed and shown the "Recovery Room" form and the blank discharge planning section. EI # 1 stated she failed to complete the discharge planning for PI # 181775. 420-5-1-.04 Physical Environment (5) Equipment and Supplies. (d) Medications and supplies which have	L 100		

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L 100	Continued From page 2 deteriorated or reached their expiration dates shall not be used for any reason. All expired or deteriorated items shall be disposed of promptly and properly. Each facility shall examine all stored medications and supplies no less frequently than once each month and shall remove from its inventory all deteriorated items and all items for which the expiration date has been reached. The facility shall maintain a log recording each such examination with its date, time, the person conducting the examination, and a description of each item or group of items removed from inventory and the reason for such removal. This rule is not met as evidence by: Based on observation of the clinic, staff failed to assure there were no expired supplies available for patient use and an opened bottle of Lidocanie was still safe for patient use. This had the potential to affect all patients served by the clinic. Findings include: On 7/26/11 at 2:30 PM, during the initial tour of the clinic Health Survey staff found an open used bottle of Lidocaine HCl 1% 10 milligram/milliliters (ml), 50 ml vial that had no date when the vial was opened. On 7/26/11 at 2:55 PM, during the initial tour of the clinic Health Survey staff found expired laboratory tubes available for patient use. There were 50 purple top tubes that expired 4/2011 and 13 tiger top tubes that expired 2/2011.	L 100		

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L 100	Continued From page 3 420-5-1-.02 Administration (8) Records and Reports. (a) Medical Records to be kept. An abortion facility shall keep adequate records, including procedure schedules, histories, results of examinations, nurses' notes, records of tests performed and all forms required by law. This rule is not met as evidenced by: Based on review of medical records and an interview with Employee Identifier (EI) # 1, the Clinic Manager it was determined in 1 of 6 minor patients the clinic failed to document where patients were referred to if not treated. This had the potential to affect all minor patients served and did affect Medical Record (MR) # 183934. Findings include: 1. Medical Record # 183934 a 17 year old presented to the clinic 7/6/11 for her first appointment. The patient was scheduled to return to the clinic 7/12/11 for a procedure. The physician who conducted the ultrasound on 7/12/11 documented the gestational age as 14 weeks 4 days and 13 weeks 5 days. The physician documented on the ultrasound exam form, "Referred for EGA (estimated gestational age) > 12 weeks." There was no documentation in the record of where the patient was referred. In an interview, EI # 1 confirmed this after reviewing the record 7/27/11.	L 100		

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L 100	Continued From page 4 420-5-1-.03 (7) Pharmaceutical Services. (b) Administering, Dispensing, and Prescribing Drugs and Medicines. Only physicians and properly credentialed nurse practitioners and physician assistants may prescribe or order medications. Nurse practitioners and physician assistants may prescribe only those medications described in their individual collaborative agreements. Except for standing orders as permitted below, medications shall be prescribed for patients of the facility by patient name after an appropriate medical evaluation. Oral and telephone orders shall be received only by a physician, nurse practitioner, physician assistant, registered professional nurse, licensed practical nurse, or a pharmacist. Oral and telephone orders shall be immediately documented in writing by the individual receiving the order. Prescribing, dispensing, and administration of medications shall meet all standards required by law and by regulations of the State Board of Medical Examiners and the State Board of Pharmacy. This rule is not met as evidenced by: Based on observation and an interview with Employee Identifier (EI) # 1, the Clinic Manager, the clinic failed to document the time the Rhogam injection was administered and site of administration in 4 of 4 patients who received Rhogam. This had the potential to affect all patients served. Findings include: Refer to 420-5-1-.02(8)(a) Records and Reports Alabama Board of Nursing, Standards of Practice Chapter 610-X-6-.06 Documentation Standards	L 100		

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L 100	Continued From page 5 (d)(iii) (d) Timely. (i) Charted at the time or after the care, including medications, is provided... Alabama Board of Nursing, Standards of Practice Chapter 610-X-6-.07 Medication Administration and Safety (1)(j) Safety precautions including but not limited to: (i) Right patient (ii) Right medication (iii) Right time (iv) Right dose (v) Right route (vi) Right reason (vii) Right documentation Medical Record findings: 1. MR # 181606 presented to the clinic 5/3/11 for her first appointment. The patient received Misoprostol tablets 5/10/11 for a medical procedure. The patient had RH negative blood and was to receive a MicroRhoGam injection. The form for the injection was attached to the medical record with the date of 5/10/11. There was no documentation of the injection being administered by the nurse, no location or time. 2. MR # 184399 presented to the clinic 7/15/11 for her first appointment. The patient had a surgical procedure 7/19/11. The patient had RH negative blood and was to receive a MicroRhoGam injection. The form for the injection was attached to the medical record with the date of 7/19/11. The nurse documented the injection was administered in the left deltoid.	L 100		

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L 100	Continued From page 6 The nurse failed to document a time the medication was administered or if the Rhogam Micro or full dose was administered. 3. MR # 184193 presented to the clinic 7/13/11 for her first appointment. The patient received Misoprostol tablets 7/19/11 for a medical procedure. The patient had RH negative blood and was to receive a MicroRhoGam injection. The form for the injection was attached to the medical record with the date of 7/19/11. There was no documentation of the time the injection was administered by the nurse. 4. MR # 183554 presented to the clinic 6/28/11 for her first appointment. The patient had a surgical procedure 7/19/11. The patient had RH negative blood and was to receive a MicroRhoGam injection. The form for the injection was attached to the medical record with the date of 7/19/11. The nurse documented the injection was administered in the right deltoid. The nurse failed to document a time the medication was administered or if the Rhogam Micro or full dose was administered. During an interview with Employee Identifier (EI) # 1, the Clinic Manager on 7/27/11 at 4:00 PM, EI # 1 confirmed she failed to document completely.	L 100		