

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AC13960104	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/15/2011
NAME OF PROVIDER OR SUPPLIER A MEDICAL OFFICE FOR WOMEN		STREET ADDRESS, CITY, STATE, ZIP CODE 909 NE 183 STREET SUITE 402 NORTH MIAMI BEACH, FL 33162		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	INITIAL COMMENTS An announced visit was conducted on September 15, 2011 for an Initial Licensure State Survey at A Medical Office for Women located at 909 NE 163rd Street, Suite #402, Miami, Florida 33162. A Medical Office for Women was found to be in noncompliance with 390.014 F.S., 59A-9 F.A.C. at the time of the survey. The following deficiencies were identified.	A 000		
A 150	Clinic Supplies/Equip. Stand.-2nd Trimester Each abortion clinic providing second trimester abortions shall provide the following essential clinic supplies and equipment: (a) A surgical or gynecological examination table(s); (b) A bed or recliner(s) suitable for recovery; (c) Oxygen with flow meters and masks or equivalent; (d) Mechanical suction; (e) Resuscitation equipment to include, at a minimum, resuscitation bags and oral airways; (f) Emergency medications, intravenous fluids, and related supplies and equipment; (g) Sterile suturing equipment and supplies; (h) Adjustable examination light; (i) Containers for soiled linen and waste materials with covers; and (j) Appropriate equipment for the administering of	A 150		

AHCA Form 3020-0001

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



TITLE

president

(X6) DATE

9/29/11

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A 150	<p>Continued From page 1</p> <p>general anesthesia, if applicable.</p> <p>Chapter 59A-9.0225(1), F.A.C.</p> <p>This STANDARD is not met as evidenced by: Based on observation and interview the facility failed to maintained sterile suturing equipment and supplies.</p> <p>Findings include:</p> <p>On September 15, 2011 at approximately 9:45 a.m., the surveyors conducted a tour of the facility. During the tour of the facility's surgical examination room, the surveyors observed an array of surgical tools called Curettes, each sealed in a clear bag stored in small to medium sized opened containers. The Curettes were located on a shelf in plain view next to the surgical examination table. An observation of the surgical tools or Curettes revealed that they are designed with a metal rod handle on one end and a loop on the other end. Further observation of the Curettes revealed a brown-stained corrosion on the inside of the loop of the Curettes, which appeared to be rust. At least seven Curettes were observed by the surveyors as having brown-stained corrosions located inside of the loop of the surgical instruments. On the back of each of the seven brown-stained Curettes, the surveyors observed a date of 1/15/2007 hand written in black.</p> <p>On September 15, 2011 at 9:50 a.m. the surveyors conducted an interview with the facility's staff. When asked for the meaning of the date</p>	A 150		

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A 150	Continued From page 2 of 1/15/2007 which is hand written on the back of the seven brown-stained Curettes, the staff stated that 1/15/2007 is the date that the surgical equipments were last sterilized. The surveyors handed the facility 's staff the seven Curettes to validate the existence of brown-stained corrosion, which is located inside of the loop of each of the seven surgical instruments. The staff acknowledged the existence of brown-stained corrossions and stated that the doctor does not use the surgical tools (curettes). During the tour, the surveyors observed three expired bottles of antiseptic located in the facility 's surgical examination room. Further observation of the three bottles of antiseptic revealed the name of Humco Strong Iodine. Two of the Humco Strong Iodine bottles have an expiration date of 08/1995 and one of Humco Strong Iodine has an expiration date of 05/2005. The surveyors handed the facility 's staff the three expired bottles of iodine. The staff acknowledged the expiration dates on each bottle and stated that the doctor does not use the antiseptic. Correction Date: October 5, 2011		A 150	All curettes are scrubbed, cleaned and sterilized again. 150. The reason for curettes to have residuals inside the loop was the fact that the loop is very small and was hard to get inside of the loop. Special brush has been provided for proper cleaning. All curettes have been cleaned and sterilized. An administrator will periodically check all instruments including curettes. Corrections will be completed by October 5, 2011.	
A 156	Clinic Supplies/equip. Stand.-2nd Trimester Equipment Maintenance. (a) When patient monitoring equipment is utilized, a written preventive maintenance program shall be developed and implemented. This equipment shall be checked and/or tested in accordance with manufacturer's specifications at periodic intervals, not less than annually, to insure proper operation, and a state of good repair. After repairs and/or alterations are made to any		A 156		

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A 156	Continued From page 3 equipment, the equipment shall be thoroughly tested for proper calibration before returning it to service. Records shall be maintained on each piece of equipment to indicate its history of testing and maintenance. (b) All anesthesia and surgical equipment shall have a written preventive maintenance program developed and implemented. Equipment shall be checked and tested in accordance with the manufacturer's specifications at designated intervals, not less than annually, to ensure proper operation and a state of good repair. (c) All surgical instruments shall have a written preventive maintenance program developed and implemented. Surgical instruments shall be cleaned and checked for function after use to ensure proper operation and a state of good repair. Chapter 59A-9.0225(7), F.A.C. This STANDARD is not met as evidenced by: Based on observation and interview, the facility failed to maintained records on emergency equipment indicating its history of maintenance and the facility failed to ensure that surgical instruments are clean and in a state of good repair. Findings include: On September 15, 2011 at approximately 9:45 a.m., the surveyors conducted a tour of the facility. During the tour of the facility's surgical examination room, the surveyors observed a defibrillator, a vital signs monitor, a suctioning	A 156		

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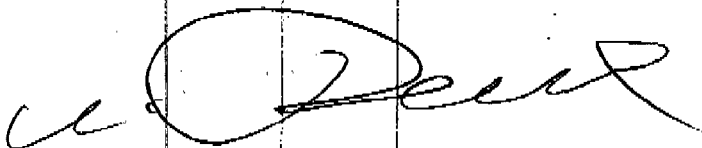
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A 156	<p>Continued From page 4</p> <p>machine and an ultrasound machine located on top of a table next to the surgical examination table. Further observation revealed a green sticker bonded to each of the four equipments with 05/2010 as the due date for the next scheduled maintenance. When the surveyors requested to review the maintenance logs and manufactures' documentation on each of the four equipments, the facility's staff stated that "they are not with me, he doesn't leave them here." When the surveyors showed the staff the green sticker, which is bonded to each of the four equipments, the staff acknowledged that the green sticker has 06/2010 as the due date for scheduled maintenance. The facility's staff stated to the surveyors that the suction machine is not used by the doctor. When asked which suction equipment is used during surgery, the staff pointed to a floor cabinet and said, "That one." Observation of the floor cabinet revealed a bigger, wider suction unit than the suction unit observed located on top of a table next to the surgical examination table. The surveyors located a green sticker bonded to the back of the bigger suction unit with the words, "quality assurance 1987" written on it. When asked who conducts the maintenance of the equipments, the staff stated, "I don't know, the machines just come back." During the tour of the surgical examination room, the surveyors observed the facility's resuscitation equipment located at the bottom of a shelf. Further observation of the resuscitation equipment revealed that it was uncovered and it contained dust particles inside of the mask. The surveyors handed the resuscitation equipment to the staff to verify the presence of dust particles inside of the mask, the staff acknowledged its presence.</p> <p>During the tour of the facility's surgical</p>	A 156	<p>Maintenance of all equipment is done yearly.</p> <p>All equipment were serviced by the Service Company. New maintenance stickers were attached.</p> <p>156. Maintenance was already performed by November 25, 2011 <i>Done 10/5/11 J.R.</i></p> <p>An administrator will monitor yearly maintenance of all equipment.</p> <p>156. All resuscitation equipment will be kept in the sealed bag. Deficiency already corrected (by October 25, 2011). An administrator will monitor its cleanness.</p> <p>All resuscitation equipment have been cleaned.</p> <p><i>corrected by October 5/2011 WTR</i></p>

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A 156	Continued From page 5 examination room, the surveyors observed an array of surgical tools called Curettes, each sealed in a clear bag stored in small to medium sized opened containers. The Curettes were located on a shelf in plain view next to the surgical examination table. An observation of the surgical tools or Curettes revealed that they are designed with a metal rod handle on one end and a loop on the other end. Further observation of the Curettes revealed a brown-stained corrosion on the inside of the loop of the Curettes, which appeared to be rust. At least seven Curettes were observed by the surveyors as having brown-stained corrossions located inside of the loop of the surgical instruments. On the back of each of the seven brown-stained Curettes, the surveyors observed a date of 1/15/2007 hand written in black. On September 15, 2011 at 9:50 a.m. the surveyors conducted an interview with the facility's staff. When asked for the meaning of the date of 1/15/2007 which is hand written on the back of the seven brown-stained Curettes, the staff stated that 1/15/2007 is the date that the surgical equipments were last sterilized. The surveyors handed the facility's staff the seven Curettes to validate the existence of brown-stained corrosion, which is located inside of the loop of each of the seven surgical instruments. The staff acknowledged the existence of brown-stained corrossions. Correction date: October 5, 2011	A 156	156. The reason for curettes to have a residuals inside the loop was the fact that the loop is very small and was hard to get inside of the loop. Special brush has been provided for proper cleaning. All curettes have been cleaned and sterilized. An administrator will periodically check all instruments including curettes. Corrections will be completed by October 5, 2011. All correction will be done by October 5, 2011 <i>corrected</i> <i>RLK</i> 	



RICK SCOTT
GOVERNOR

Better Health Care for all Floridians

ELIZABETH DUDEK
SECRETARY

September 26, 2011

Administrator
A Medical Office For Women
909 Ne 163 Street Suite 402
North Miami Beach, FL 33162

Dear Administrator:

This letter reports the findings of a State Licensure survey that was conducted on September 15, 2011 by representatives of this office.

Attached is the provider's copy of the State (3020) Form, which indicates the deficiencies that were identified on the day of the visit.

Please provide a plan of correction to this Field Office, in accordance with enclosed instructions, for the identified deficiencies **within ten calendar days of receipt of this faxed report**. You will not receive a copy of this report in the mail, you will only receive this faxed report. **All deficiencies shall be corrected no later than October 15, 2011.**

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at <http://ahca.myflorida.com/Publications/Forms.shtml> as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyors. Should you have any questions please call Faith Randolph, Registered Nurse Consultant at (305) 593-3100.

Sincerely,

Arlene Mayo-Davis (for)
Acting Field Office Manager, Area 11

Enclosures: State (3020) Form and POC Guidelines

Headquarters
2727 Mahan Drive
Tallahassee, FL 32308
<http://ahca.myflorida.com>



Miami Field Office
8333 N.W. 53rd Street, Suite 300
Miami, FL 33166
Phone (305) 593-3100; Fax (305) 593-3121