Division of Health Service Regulation (X1) PROVIDER/SUPPLIER/CLIA STATEMENT OF DEFICIENCIES (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY **IDENTIFICATION NUMBER:** COMPLETED AND PLAN OF CORRECTION A. BUILDING: B. WING AB0026 03/25/2015 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 700 HEBRON STREET FAMILY REPRODUCTIVE HEALTH, IN CHARLOTTE, NC 28273 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE PRÉFIX **PREFIX** CROSS-REFERENCED TO THE APPROPRIATE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG DEFICIENCY) . 0311(B) SURGICAL SERVICES E 158 .0311(B) SURGICAL SERVICES E 158 The physician performing the abortion always examines + documents the uterine wontents/ 10A-14E .0311 (b) Tissue Examination: (1) The physician performing the abortion is responsible for products of conception (POC) for examination of all products of presence or absence of whorionic conception (P.O.C.) prior to patient Julli or fetal parts or the amniotic discharge. Such examination shall Sac, prior to patient discharge, note specifically the presence or "Normal products of conception for gestational age - YES-NO". "Products of conception appeared - normal absence of chorionic villi and fetal parts or the amniotic sac. The results of the examination shall be recorded in the patient's medical -abordmal. record. *The physician will now document & 4.24.15 (2) The facility shall have written procedures, supplies and equipment the findings in longhand specifically the presence or absence of charionic Villi or fetal parts or the amniotic Sac to reflect clact language required available for gross and microscopic evaluation of abortion specimens. If placental or fetal tissue is not identified by gross examination, a by 10A NCAC 14E, 0311. microscopic examination must be done on the P.O.C. In cases where the microscopic evaluation is negative for ** We will verise the surgery chorionic villi and fetal parts, or notes, ("Procedure") form to reflect the exact language required by the weight of the P.O.C. falls substantially below the appropriate 10A NEAC ITE, OBIL. weight range for the fetal age, a microscopic examination by a board certified or board eligible pathologist shall be done on the P.O.C. (3) The results of this examination, the findings of further patient evaluation and any subsequent treatment must be recorded in the patient's medical record. (4) The facility shall establish procedures for obtaining, identifying, storing and transporting specimens. (5) The facility shall establish a method for follow-up of patients on Division of Health Service Regulation

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

PN

4.22.15

PRINTED: 04/13/2015 FORM APPROVED

STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** COMPLETED A. BUILDING: B. WING AB0026 03/25/2015 STREET ADDRESS, CITY, STATE, ZIP CODE NAME OF PROVIDER OR SUPPLIER 700 HEBRON STREET FAMILY REPRODUCTIVE HEALTH, IN CHARLOTTE, NC 28273 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID (X5) COMPLETE ID (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE PREFIX **PREFIX** REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG TAG DEFICIENCY) E 158 E 158 Continued From page 1 whom no villi are seen. This Rule is not met as evidenced by: Based on policy review, medical record reviews and staff interview the physician performing the surgical abortion procedure failed to document in the patient's medical record specifically the presence or absence of chorionic villi and fetal parts or the amniotic sac in the products of conception (POC) in 8 of 8 patients having a surgical abortion procedure (#'s 1, 2, 5, 6, 7, 8, 9, and 10). The Findings include: Review of clinic policy "PROTOCOL FOR 'NO CHORIONIC VILLI", revealed "It is the policy of XX(name of clinic) to send uterine contents specimens to Physicians Lab Service for pathological-microscopic examination upon order by physician. All specimens will be examined immediately post-op for presence of chorionic villi and results will be documented in patients chart 1. Medical record review of Patient #1 revealed the patient had a surgical abortion procedure on 03/14/2015. Record review did not reveal documentation of chorionic villi and fetal parts or amniotic sac in the POC. 2. Medical record review of Patient #2 revealed the patient had a surgical abortion procedure on 03/17/2015. Record review did not reveal documentation of chorionic villi and fetal parts or amniotic sac in the POC. 3. Medical record review of Patient #5 revealed the patient had a surgical abortion procedure on 01/13/2015. Record review did not reveal documentation of chorionic villi and fetal parts or

Division of Health Service Regulation

PRINTED: 04/13/2015 FORM APPROVED Division of Health Service Regulation (X1) PROVIDER/SUPPLIER/CLIA STATEMENT OF DEFICIENCIES (X3) DATE SURVEY (X2) MULTIPLE CONSTRUCTION **IDENTIFICATION NUMBER:** AND PLAN OF CORRECTION COMPLETED A. BUILDING: B. WING AB0026 03/25/2015 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 700 HEBRON STREET FAMILY REPRODUCTIVE HEALTH, IN CHARLOTTE, NC 28273 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE (X4) ID (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE PRÉFIX **PREFIX** REGULATORY OR LSC IDENTIFYING INFORMATION) DATE TAG TAG CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) E 158 E 158 Continued From page 2 amniotic sac in the POC. 4. Medical record review of Patient #6 revealed the patient had a surgical abortion procedure on 08/21/2014. Record review did not reveal documentation of chorionic villi and fetal parts or amniotic sac in the POC. 5. Medical record review of Patient #7 revealed the patient had a surgical abortion procedure on 03/24/2015. Record review did not reveal documentation of chorionic villi and fetal parts or amniotic sac in the POC. 6. Medical record review of Patient #8 revealed the patient had a surgical abortion procedure on 03/24/2015. Record review did not reveal documentation of chorionic villi and fetal parts or amniotic sac in the POC. 7. Medical record review of Patient #9 revealed the patient had a surgical abortion procedure on 08/24/2014. Record review did not reveal documentation of chorionic villi and fetal parts or amniotic sac in the POC. We appreciate this report from the department. Our intention 8. Medical record review of Patient #10 revealed the patient had a surgical abortion procedure on 07/25/2014. Record review did not reveal is to stay in compliance with all documentation of chorionic villi and fetal parts or regulations pertaining to our practice. amniotic sac in the POC. Feledback from the Department is lessential in Cetting us know when Interview with administrative staff #1 and #2 via our forms + policies need clarification or walrestion. Thank you par your phone on 03/25/2015 at 1400 revealed there was no further documentation available of the

physician's identification of specifics of the POC.

recent detailed unspection. We used come the Department's input.



MAY 05 2015 CBB 05 08 15

Addendum to Plan of Correction for survey completed on 3.25.15

. 0311 (B) Surgical Services

E158

The physician performing the abortion always examines + documents the uterine vantents/products of conception (P.O.C.) for presence or absence of chorionic willie AND fetal parts or the amniotic Sac, prior to pt discharge, "Normal products of conception for gestational age _Yes _ No." Products of vanception appeared _ marmal _ abnormal.

* The physician will now document the findings in longhand specifically the presence or absence of whorieric will AND fetal parts or the amnistic sac to reflect exact language required by IOA NEAC 14E. 0311.

4.29.15

Kenya Mauldin, RN

4.29.15