STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AB0030	A. BUILDING: _____ B. WING _____	06/16/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CRIST CLINIC FOR WOMEN	250 MEMORIAL DRIVE JACKSONVILLE, NC 28546

RM 98.

(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
E 156	.0310 EMERGENCY BACK-UP SERVICES 10A-14E .0310 The facility shall provide intervention for emergency situations. These provisions shall include but are not limited to: (1) Basic cardio-pulmonary life support; (2) Emergency protocols for: (a) Venous access supplies; (b) Air-way support and oxygen; (c) Bag-valve mask unit with oxygen reservoir, and (d) Suction machine; (3) Emergency lighting available in the operating room; and (4) Ultrasound equipment. This Rule is not met as evidenced by: Based on observation during tours and staff interviews, the facility failed to provide supplies for emergency interventions for emergency situations. The findings include: Observations during tour on 06/16/2015 1430 revealed there were no supplies for venous access (starting IV's), no bag-valve mask unit with oxygen reservoir (BVM) and no suction machine for airway suction available for use in an emergency situation. Tour revealed a portable oxygen cylinder with a nasal cannula available for emergency oxygen needs. Interview with Registered Medical Assistant (RMA) on 06/16/2015 at 1430 during tour revealed if an emergency arises they call 911. Interview revealed RMA stated " Emergency Medical Services responds so fast they can be at the clinic before IV would be started (venous	E 156	Ambu bag was ordered 07/20/15 and delivered to Clinic on 07/22/15. Was put into service on that date. AED unit was ordered on 07/20/15 and arrived at Clinic on 07/23/15 and was put into service on that date. IV solution and supplies for venous access were ordered from McKesson on 07/07/15 and placed into service upon delivery on 07/16/15. An emergency suction machine was ordered on 07/30/15 and will be placed into service no later than 08/10/15 which is the outside of the delivery anticipation date. Monitoring of the AED and suction set will be added to the current list of equipment that has preventative maintenance performed yearly by Modern Biomedical Technologies. Invoices are attached for above equipment with exception of IV supplies. All of these supplies are to be monitored for any deficiencies or problems and Modern Biomedical is to be called to correct the problem. The monitoring will be carried out on a monthly schedule and noted on the daily TA logs that these items were checked. Cross-check for this will be responsibility of Clinical Supervisor, Bridget Amancio, LPN	08/10/2015

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Sharon Cannon

TITLE: PRACTICE MANAGER

(X6) DATE: 07/28/15

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AB0030	A. BUILDING: _____ B. WING _____	06/16/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CRIST CLINIC FOR WOMEN	250 MEMORIAL DRIVE JACKSONVILLE, NC 28546

(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
E 156	Continued From page 1 access)".	E 156		
E 158	.0311(B) SURGICAL SERVICES 10A-14E .0311 (b) Tissue Examination: (1) The physician performing the abortion is responsible for examination of all products of conception (P.O.C.) prior to patient discharge. Such examination shall note specifically the presence or absence of chorionic villi and fetal parts or the amniotic sac. The results of the examination shall be recorded in the patient's medical record. (2) The facility shall have written procedures, supplies and equipment available for gross and microscopic evaluation of abortion specimens. If placental or fetal tissue is not identified by gross examination, a microscopic examination must be done on the P.O.C. In cases where the microscopic evaluation is negative for chorionic villi and fetal parts, or the weight of the P.O.C. falls substantially below the appropriate 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	E 158	Policy manual in place when inspection occurred did not specifically stated that products of conception were to be documented as determined or undetermined in a patient's individual chart. Policy was revised to include such wording stating that Physician examination of POC or lack thereof is to be documented into patient chart. This policy applies to all of the deficiencies noted under E158. 07/03/2015 A new policy for monitoring patient's chart for documentation of both POC and time patient went to recovery, length of recovery stay and discharge time was written and implemented on 07/27/15. Monitoring of the initial charts will be done by each biller on duty and a daily log will be kept by each for all therapeutic abortion charts listing the patient name, date of service, POC documented or not and recovery times noted as above policy states. Monthly the biller's logs will be compared to the logs in the Surgical Area for compliance and will be the responsibility of the Clinical Supervisor, Bridget Amancio, LPN and should she be unavailable, will be done by the Practice Manager, Sharon Cannon. Policy is attached to this document. Applies to all deficiencies noted under E158 and E161 07/27/2015	

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AB0030	A. BUILDING: _____ B. WING _____	06/16/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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(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
E 158	Continued From page 2 procedures for obtaining, identifying, storing and transporting specimens. (5) The facility shall establish a method for follow-up of patients on whom no villi are seen. This Rule is not met as evidenced by: Based on policy review, review of medical records and staff interview, the physician failed to document the examination of all products of conception post procedure for 7 of 10 patient records reviewed (#4, #5, #6, #7, #8, #9 and #10). The findings include: Review of the policies revealed no policy for documentation requirements of products of conception in medical records. 1. Closed medical record review of Patient #4 revealed a 19 year-old female who had a surgical abortion on 05/19/2015. Record review revealed no documentation of examination of products of conception post procedure. Interview with Registered Medical Assistant on 06/16/2015 at 1500 revealed she was not aware of all state required documentation in the medical record. 2. Closed medical record review of Patient #5 revealed a 23 year-old female who had a surgical abortion on 04/30/2015. Record review revealed no documentation of examination of products of conception post procedure. Interview with Registered Medical Assistant on 06/16/2015 at 1500 revealed she was not aware of all state required documentation in the medical	E 158		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AB0030	A. BUILDING: _____ B. WING _____	06/16/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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E 158	Continued From page 3 record. 3. Closed medical record review of Patient #6 revealed a 41 year-old female who had a surgical abortion on 04/14/2015. Record review revealed no documentation of examination of products of conception post procedure. Interview with Registered Medical Assistant on 06/16/2015 at 1500 revealed she was not aware of all state required documentation in the medical record. 4. Closed medical record review of Patient #7 revealed a 25 year-old female who had a surgical abortion on 03/19/2015. Record review revealed no documentation of examination of products of conception post procedure. Interview with Registered Medical Assistant on 06/16/2015 at 1500 revealed she was not aware of all state required documentation in the medical record. 5. Closed medical record review of Patient #8 revealed a 37 year-old female who had a surgical abortion on 03/17/2015. Record review revealed no documentation of examination of products of conception post procedure. Interview with Registered Medical Assistant on 06/16/2015 at 1500 revealed she was not aware of all state required documentation in the medical record. 6. Closed medical record review of Patient #9 revealed a 27 year-old female who had a surgical abortion on 05/19/2015. Record review revealed no documentation of examination of products of conception post procedure.	E 158		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AB0030	A. BUILDING: _____ B. WING: _____	06/16/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CRIST CLINIC FOR WOMEN	250 MEMORIAL DRIVE JACKSONVILLE, NC 28546

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E 158	Continued From page 4 Interview with Registered Medical Assistant on 06/16/2015 at 1500 revealed she was not aware of all state required documentation in the medical record. 7. Closed medical record review of Patient #3 revealed a 29 year-old female who had a surgical abortion on 04/28/2015. Record review revealed no documentation of examination of products of conception post procedure. Interview with Registered Medical Assistant on 06/16/2015 at 1500 revealed she was not aware of all state required documentation in the medical record.	E 158		
E 161	.0313(A) POST-OPERATIVE CARE 10A-14E .0313 (a) Patients whose pregnancy is terminated on an ambulatory basis should be observed in the abortion clinic for a reasonable number of hours, not less than one, to insure that no immediate post-operative complications are present. Thereafter, such patients may be discharged if their course has been uneventful. This Rule is not met as evidenced by: Based on policy review, review of medical records and staff interview, the facility failed to ensure a minimum of one hour observation after a procedure for 8 of 10 patient records reviewed (#3, #4, #5, #6, #7, #8, #9 and #10). The finding include:	E 161	Addressing E161: A new policy for monitoring patient's chart for documentation of both POC and time patient went to recovery, length of recovery stay and discharge time was written and implemented on 07/27/15. Monitoring of the initial charts will be done by each biller on duty and a daily log will be kept by each for all therapeutic abortion charts listing the patient name, date of service, POC documented or not and recovery times noted as above policy states. Monthly the biller's logs will be compared to the logs in the Surgical Area for compliance and will be the responsibility of the Clinical Supervisor, Bridget Amancio, LPN and should she be unavailable, will be done by the Practice Manager, Sharon Cannon. Policy is attached to this document. Applies to all deficiencies noted under E158 and E161 Please note that the original policy stated the patient was to remain in recovery area for at least one hour, but did not state it needed to be documented in patient chart.	07/27/2015

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	AB0030	A. BUILDING: _____ B. WING _____	06/16/2015

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E 161	Continued From page 5 Review of the facility's policies revealed no policy for observing a patient for a minimum of one hour after the procedure. 1. Closed medical record review of Patient #3 revealed a 34 year-old female who had a surgical abortion on 06/05/2015. Record review revealed no documented time to recovery area post procedure to discharge time. Interview with Registered Medical Assistant on 06/16/2015 at 1500 revealed she was not aware of all state required documentation in medical record. Interview revealed patients do stay their required post operative minimum stay but information is not documented in medical record. 2. Closed medical record review of Patient #4 revealed a 19 year-old female who had a surgical abortion on 05/19/2015. Record review revealed no documented time to recovery area post procedure to discharge time. Interview with Registered Medical Assistant on 06/16/2015 at 1500 revealed she was not aware of all state required documentation in medical record. Interview revealed patients do stay their required post operative minimum stay but information is not documented in medical record. 3. Closed medical record review of Patient #5 revealed a 23 year-old female who had a surgical abortion on 04/30/2015. Record review revealed no documented time to recovery area post procedure to discharge time. Interview with Registered Medical Assistant on 06/16/2015 at 1500 revealed she was not aware of all state required documentation in medical	E 161		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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E 161	Continued From page 6 record. Interview revealed patients do stay their required post operative minimum stay but information is not documented in medical record. 4. Closed medical record review of Patient #6 revealed a 41 year-old female who had a surgical abortion on 04/14/2015. Record review revealed no documented time to recovery area post procedure to discharge time. Interview with Registered Medical Assistant on 06/16/2015 at 1500 revealed she was not aware of all state required documentation in medical record. Interview revealed patients do stay their required post operative minimum stay but information is not documented in medical record. 5. Closed medical record review of Patient #7 revealed a 25 year-old female who had a surgical abortion on 03/19/2015. Record review revealed no documented time to recovery area post procedure to discharge time. Interview with Registered Medical Assistant on 06/16/2015 at 1500 revealed she was not aware of all state required documentation in medical record. Interview revealed patients do stay their required post operative minimum stay but information is not documented in medical record. 6. Closed medical record review of Patient #8 revealed a 37 year-old female who had a surgical abortion on 03/17/2015. Record review revealed no documented time to recovery area post procedure to discharge time. Interview with Registered Medical Assistant on 06/16/2015 at 1500 revealed she was not aware of all state required documentation in medical record. Interview revealed patients do stay their	E 161		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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E 161	Continued From page 7 required post operative minimum stay but information is not documented in medical record. 7. Closed medical record review of Patient #9 revealed a 27 year-old female who had a surgical abortion on 05/19/2015. Record review revealed no documented time to recovery area post procedure to discharge time. Interview with Registered Medical Assistant on 06/16/2015 at 1500 revealed she was not aware of all state required documentation in medical record. Interview revealed patients do stay their required post operative minimum stay but information is not documented in medical record. 8. Closed medical record review of Patient #3 revealed a 29 year-old female who had a surgical abortion on 04/28/2015. Record review revealed no documented time to recovery area post procedure to discharge time. Interview with Registered Medical Assistant on 06/16/2015 at 1500 revealed she was not aware of all state required documentation in medical record. Interview revealed patients do stay their required post operative minimum stay but information is not documented in medical record.	E 161		
E 165	.0314 CLEANING OF MATERIALS AND EQUIPMENT 10A-14E .0314 (a) All supplies and equipment used in patient care shall be properly cleaned or sterilized between use for different patients. (b) Methods of cleaning, handling, and storing all supplies and equipment	E 165		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AB0030	A. BUILDING: _____ B. WING _____	06/16/2015

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E 165	Continued From page 8 shall be such as to prevent the transmission of infection through their use. This Rule is not met as evidenced by: Based on policy review, review of medical records and staff interview, the facility failed to maintain a temperature log on a medication refrigerator. The findings include: Review of policies revealed no policy for monitoring of medication refrigerators. Observation during tour of the facility on 06/16/2015 at 1400 revealed a refrigerator with medications present in the nursing station with no temperature log present. Interview with Registered Medical Assistant revealed she was not aware there was not a log kept. Interview revealed she assumed the refrigerator log was in the nursing office and that it is an expectation for temperatures in the medication refrigerator to be checked daily.	E 165	To address deficiencies in E165: Since there was no current policy in the manual addressing this specifically, a form for logging temperatures on a daily basis was developed and will be kept in the cabinet above each unit containing medicines or medical devices etc. Each unit will be assigned a number and the log will coincide with it. As the log pages fill they will be transferred to a binder and made available for inspection at any given time. A procedural ammendment was designed to address this particular deficiency and instructions on full compliance. The monitoring of the daily log sheets will be monitored by the Clinical Supervisor, Bridget Amancio, LPN and will be performed at least weekly. If logging is not being performed as it should be, the Practice Manager has explained it is the responsibility of the MA closest to the refrigerator needing monitoring to complete this daily. It was also explained that should this not be done in compliance with the amendment to 10A-14E .0314 Cleaning of materials and equipment, a written report of this non-compliance will become a permanent part of the personnel file. Full compliance date anticipated to be no later than 08/10/15	08/10/2015

CRIST CLINIC FOR WOMEN

PATHOLOGICAL PROCEDURES

PROCEDURE- PATHOLOGICAL SERVICES

PROCEDURE:

1. *All products of conception (POC) 10 weeks to 12 weeks will be gross examined by a physician with written report of identification or lack thereof in patients chart. All POC identified by physician will be sent to Stericycle Incorporated for disposal.*
2. *All products of conception under 10 weeks and or products of conception not identified will be sent to Solstas/Quest Laboratories for examination and written report. All reports from the lab will be imported into the patient's electronic health record.*

ROUTINE SPECIMENS

1. *Place specimen in appropriate size container.*
2. *The amount of formalin fixative fluid will be 10 times the size of the specimen.*
3. *Only one specimen per container.*
4. *Place label on side of container.*
5. *Label specimen clearly and accurately.*
6. *Complete a pathology slip for each specimen. Operating Room personnel will fill this out in detail.*
7. *Any item (tissue or foreign body) removed from the patient will be sent to the pathologist for verification and written report.*

EFFECTIVE DATE:ORIGINAL DATE: 06/01/2013

REVISION DATE: JULY 1, 2014

FIRST REVISION: JULY 3, 2015

AUTHORIZED BY: TAKEY CRIST MD, FACOG, FACS, MEDICAL DIRECTOR

Authorized signature: Takey Crist, MD ***Date:*** 07/03/2015

ORIGINAL EFFECTIVE DATE: JUNE 1, 2013

REVISION DATE: JULY 1, 2014 SECOND REVISION: JULY 3, 2015

PROCEDURE FOR A DILATION AND EVACUATION

POLICY: PROCEDURE FOR A DILATION AND EVACUATION

PROCEDURE:

There is no doubt that an abortion by dilation and evacuation hurts. One of the main purposes of counseling is to calm the patient enough so that she will be cooperative with the doctor during the procedure. By knowing exactly what will happen and how it will feel will help the patient have control over the situation.

1. *The procedure will take no more than 3 – 5 minutes.*
2. *The first thing a patient will have done is a pelvic exam.*
    a. *The patient will be taken to the bathroom to empty her bladder so she will be more comfortable during the exam and procedure.*

3. After the pelvic exam is completed, the physician will put a speculum in the opening of the vagina to hold it open for the procedure.

4. The physician will take a gauze swab, dip it in a sterile cleaning solution, and clean out the vagina. It feels cold and wet.

5. *The next step is to place a clamp on each side of the cervix to hold it in place- explain that cervix has very few nerves, and patient may not even feel the clamps.*
6. *The next step is to numb or deaden the cervix. The medicine the physician uses is stronger and works faster than the medicine a dentist uses.*
    a. *There is not much feeling in that area, so the patient feels a sting for 2 – 3 seconds until the medicine gets in the cervix and deadens it. She will feel the sting a few times as the doctor numbs around the cervix.*

(continued)

7. *Next, the cervix is dilated – which means to stretch it open. This is done with instruments called pratts. These instruments are shaped like a pen, and start out with a very small one about the size of a pen point. Each one gets a little larger than the one before it. The physician starts with the smallest one, puts it into the cervix, then takes it out- takes next larger one, puts it in, then takes it out. Assure patient she will not feel this because the cervix has been deadened. Explain that at this time she may feel cramping that feels like cramps on the first day of her period. If she has never experienced period cramps, she will probably only feel sensations, but if she usually has period cramps, she will feel cramping like her period at this time.*

8. *Now the physician is ready for the last step which is to clean out the uterus. He does this with a suction machine. The machine has a long tube that comes from it with a suction catheter on the end of it which he puts up into the uterus. When the machine is turned on, the patient hears a lot of noise, like a motor running.*

9. *When the doctor finishes, one or two tampons will be inserted into the vagina. They are used as a packing to absorb the initial blood loss.*

10. *After the procedure is completed, the patient will get up, put a sanitary pad in her underwear, get dressed, and go to the Recovery Room. She will take her medications, antibiotic and pain meds. Refreshments will be given if desired. She will stay for one hour or longer so her blood pressure can be rechecked and to verify she is not bleeding too heavily before being discharged. Full documentation of time to recovery area and time discharged shall be noted in the patient's chart as well as on the daily procedural log. Under NO circumstances will a patient be discharged prior to one hour in the recovery area.*

11. *Go over After An Abortion sheet.*

12. *Explain methods of birth control available.*

    - *Birth control pills- to take as instructed prior to discharge.*
    - *IUD- put in on six week recheck appointment.*
    - *Depo-Provera 150 mg IM injection given once every 12 weeks for contraception*

APPROVED BY: TAKEY CRIST, MD, FACOG, FACS

ORIGINALLY APPROVED: 06/01/13 REVISION APPROVED: 07/01/2014

REVISION DATE: July 3, 2015

SIGNATURE OF APPROVAL: Takey Crist, MD DATE: 07/03/2015

ATTACHMENT 2

TEST TESTPATIENT MRN Birthday **1982-01-04** Phone **9101234567**

Visited on: 2015 Jul 20 10:39 (Age at visit: 33 years) Last edited by: Tabitha Feldmeier on 2015-07-20

Medications

Combivent 18 mcg-103 mcg-/inh inhalation aerosol , 1-2 puffs prn symptoms

Allergies

No known allergies

Objective

IUP: ???weeks?? days by ultrasound performed on ??/??/2015
Procedure Performed:
Paracervical Block
Xylocaine1%
Betadine Douche
Quality of Anesthesia
Pitocin
Methergine
Valium
Other drugs Administered:
Volume of Tissue Obtained:
10 cc
20 cc
30 cc
40 cc
50 cc
100 cc
Tissue seen and examined by physician on light table under magnifying lamp: chorionic villi/fetal head/spine/extremities/placenta
Complications:
NONE
Hemorrhage
Cervical Laceration
Perforation of Uterus
Instruments Used:
Sterile Gloves
Plastic Speculum- Small
Plastic Speculum- Medium
Single Tooth Tenaculum ?? size
Sound
Disposable Syringe 20 cc
Disposable Syringe 30 cc
Dilators:
20 gauge 3 inch Spinal Needle
Straight Suction Catheter #?????
Collection Set:
Curet:
Tampon
Other:
Time of Procedure:
Time to Recovery:
Time of Discharge:

ATTACHMENT 3

ORIGINAL EFFECTIVE DATE: JULY 27, 2015

PROCEDURE FOR MONITORING CHARTING COMPLETION ON ABORTION PATIENTS

POLICY: MONITORING PATIENT CHARTS FOR COMPLETION OF REQUIRED ELEMENTS

PROCEDURE:

Each chart will be reviewed by one of the billing staff and logged with identifying information, regarding whether or not products of conception were noted on patient chart, if the specimen was not adequate and sent to pathology for review and if chorionic villi were or were not noted. As this chart review is done an answer of yes or no under heading of POC NOTED is all that is required. The same will be done for recovery area entry time and discharge time documentation on the patient's chart.

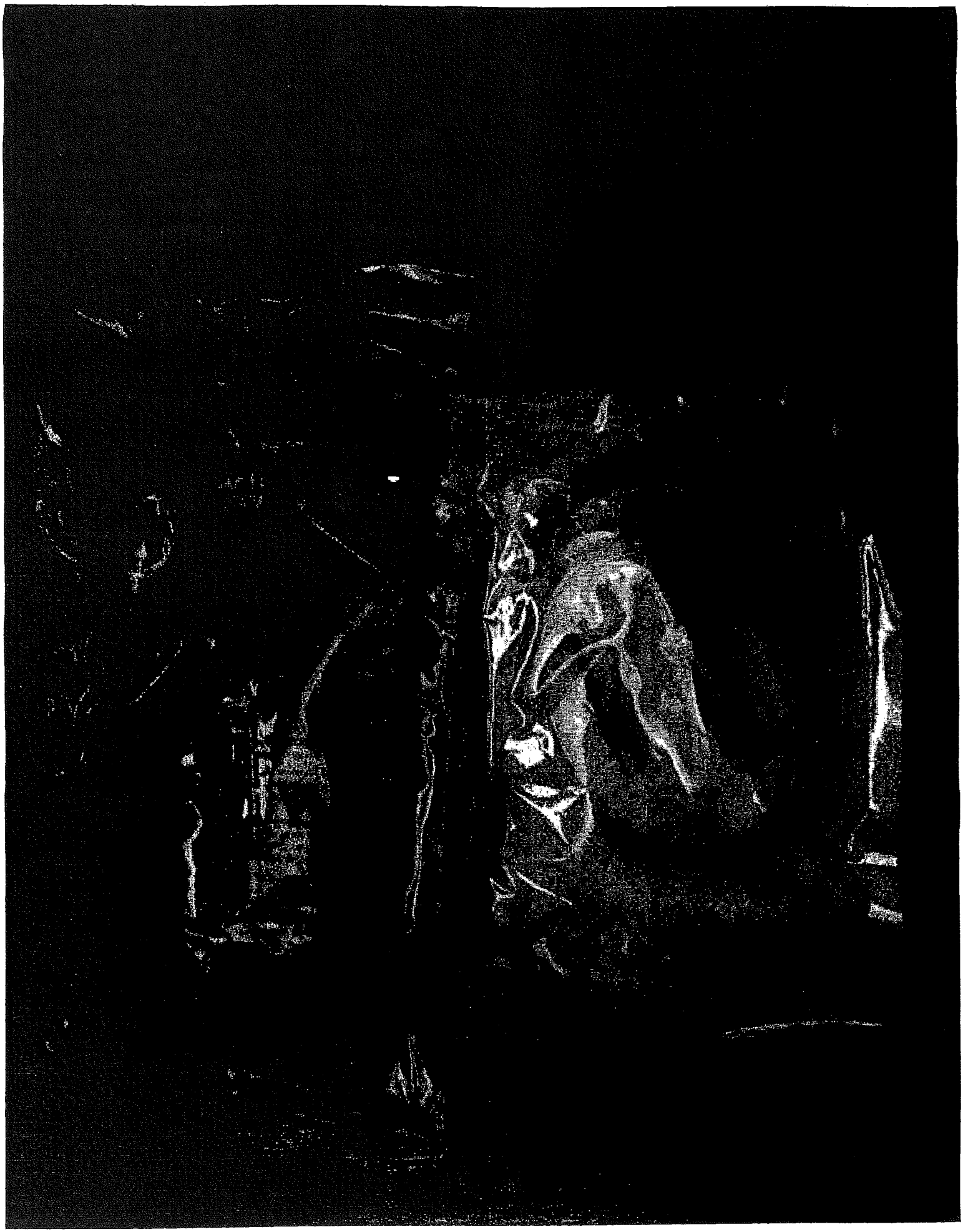
Each biller shall maintain an individual record indicating the above and at the end of each month, the logs will be compared with the logs maintained in the surgical area for comparison. This will be monitored by either the Practice Administrator or Clinical Support Staff Supervisor.

If the logs are found to match with no disparity, they will be attached to the back of the logs from the surgical area for that month. If a disparity is noted, verification of missing information will be located and an addendum to the patient's chart completed and signed off by performing physician.

APPROVED BY TAKEY CRIST, MD, FACOG, FACS

ORIGINALLY APPROVED ON JULY 27, 2015

SIGNATURE OF APPROVAL: Takey Crist, MD 07/27/2015



ATTACHMENT 3

	Normal Range 2-8 C / 35-46 F			MONTH-	YEAR	
DATE	TEMP	Time	Initials	Corrective Action Taken	Re -Temp	Time
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
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29						
30						
31						

Personnel:

Kim Shields- _____

Jean Mitchell- _____

Cynthia Hopkins - _____

Jean Ditmer- _____

Ashley Gilchrist- _____

Heydi Juarez – _____

Bridget Amancio, LPN _____ Clinical Supervisor

ATTACHMENT 4

ORIGINAL EFFECTIVE DATE: 07/08/2015

PROCEDURE: AMMENDMENT TO 10A-14E .0314 CLEANING OF MATERIALS AND EQUIPMENT

POLICY: REFRIGERATOR MONITORING LOGS

PROCEDURE: EACH INDIVIDUAL REFRIGERATOR THAT STORES MEDICAL SUPPLIES INCLUDING BUT NOT LIMITED TO MEDICATIONS ARE TO HAVE THE TEMPERATURES RECORDED ON AN INDIVIDUAL LOG FOR THAT PARTICULAR UNIT. THIS MUST BE DONE AT MINIMUM ONCE PER DAY. THE LOG IS TO BE KEPT ACCESSIBLE FOR INSPECTION NEAR OR AROUND EACH UNIT. THE MONITORING OF COMPLIANCE WITH THIS WILL BE DONE BY THE CLINICAL SUPERVISOR.

REQUIREMENTS ON LOG ARE DATE, TEMPERATURE, TIME CHECKED, INITIALS OF PERSON CHECKING UNIT, CORRECTIVE ACTION IF ANY TAKEN, RE-TEMP IF REQUIRED AFTER CORRECTIVE ACTION AND THE TIME IT WAS TAKEN.

AUTHORIZED BY: TAKEY CRIST, MD, FACOG, FACS, MEDICAL DIRECTOR

APPROVAL SIGNATURE: Takey Crist, MD DATE: 07/08/2015

amazonsmile

Final Details for Order #110-4313785-4185831

Print this page for your records.

Order Placed: July 20, 2015
Amazon.com order number: 110-4313785-4185831
Order Total: $25.11
Supporting: Wounded Warrior Project

Shipped on July 20, 2015

Items Ordered	**Price**
1 of: *Adult BVM (Bag Valve Mask)* Sold by: GoodDeal Resources (seller profile) Condition: New	$19.41

Shipping Address:
Sharon Cannon
250 MEMORIAL DR
JACKSONVILLE, NC 28546-6332
United States

Shipping Speed:
Standard Shipping

Item(s) Subtotal:	$19.41
Shipping & Handling:	$5.70
Total before tax:	$25.11
Sales Tax:	$0.00
Total for This Shipment:	**$25.11**

Payment information

Payment Method:
Discover | Last digits: 8597

Billing address
Sharon Cannon
120 Peartree Lane
Richlands, NC 28574
United States

Item(s) Subtotal:	$19.41
Shipping & Handling:	$5.70
Total before tax:	$25.11
Estimated tax to be collected:	$0.00
Grand Total:	**$25.11**

Credit Card transactions	
Discover ending in 8597: July 20, 2015:	$25.11

To view the status of your order, return to Order Summary.

Please note: This is not a VAT invoice.

amazonsmile

Final Details for Order #110-8972086-7500224

Print this page for your records.

Order Placed: July 20, 2015
Amazon.com order number: 110-8972086-7500224
Order Total: $1,199.00
Supporting: Wounded Warrior Project

Shipped on July 21, 2015

Items Ordered	Price
1 of: *Philips Value Package* Sold by: PurchaseAEDs (seller profile) Condition: New Authorized Philips HeartStart Distributor	$1,199.00

Shipping Address:
Sharon Cannon
250 MEMORIAL DR
JACKSONVILLE, NC 28546-6332
United States

Shipping Speed:
Standard

Item(s) Subtotal:	$1,199.00
Shipping & Handling:	$0.00
Total before tax:	$1,199.00
Sales Tax:	$0.00
Total for This Shipment:	**$1,199.00**

Payment information

Payment Method:
Discover | Last digits: 8597

Billing address
Sharon Cannon
120 Peartree Lane
Richlands, NC 28574
United States

Item(s) Subtotal:	$1,199.00
Shipping & Handling:	$0.00
Total before tax:	$1,199.00
Estimated tax to be collected:	$0.00
Grand Total:	**$1,199.00**

Credit Card transactions	Discover ending in 8597: July 21, 2015: $1,199.00

To view the status of your order, return to Order Summary.

Please note: This is not a VAT invoice.

amazonsmile

Final Details for Order #113-3447497-4409831

Print this page for your records.

Order Placed: July 30, 2015
Amazon.com order number: 113-3447497-4409831
Order Total: $13.33

Shipped on July 31, 2015

Items Ordered	**Price**
1 of: *Full Suction Kit (800cc bottle, 72" blue-tip tubing, and AG5604 filter set)* Sold by: Direct Care Store (seller profile) Condition: New	$18.18

Shipping Address:
Sharon Cannon
250 MEMORIAL DR
JACKSONVILLE, NC 28546-6332
United States

Shipping Speed:
Standard

Item(s) Subtotal:	$18.18
Shipping & Handling:	$0.00
Total before tax:	$18.18
Sales Tax:	$0.00
Rewards Points:	-$4.85
Total for This Shipment:	**$13.33**
Total paid by Rewards Points:	**-$4.85**

Payment information

Payment Method:
Discover | Last digits: 8597
Rewards Points

Billing address
Sharon Cannon
120 Peartree Lane
Richlands, NC 28574
United States

Item(s) Subtotal:	$18.18
Shipping & Handling:	$0.00
Total before tax:	$18.18
Estimated tax to be collected:	$0.00
Rewards Points:	-$4.85
Grand Total:	**$13.33**

Credit Card transactions	Discover ending in 8597: July 31, 2015: $13.33

To view the status of your order, return to Order Summary.

Please note: This is not a VAT invoice.

ORIGINAL EFFECTIVE DATE: 07/08/2015

PROCEDURE: AMMENDMENT TO 10A-14E .0314 CLEANING OF MATERIALS AND EQUIPMENT

POLICY: REFRIGERATOR MONITORING LOGS

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AUTHORIZED BY: TAKEY CRIST, MD, FACOG, FACS, MEDICAL DIRECTOR

APPROVAL SIGNATURE: Takey Crist, MD DATE: 07/08/2015

ORIGINAL EFFECTIVE DATE: 07/08/2015

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AUTHORIZED BY: TAKEY CRIST, MD, FACOG, FACS, MEDICAL DIRECTOR

APPROVAL SIGNATURE: Takey Crist, MD DATE: 07/08/2015

CRIST CLINIC FOR WOMEN

ORIGINAL EFFECTIVE DATE: JULY 27, 2015

PROCEDURE FOR MONITORING CHARTING COMPLETION ON ABORTION PATIENTS

POLICY: MONITORING PATIENT CHARTS FOR COMPLETION OF REQUIRED ELEMENTS

PROCEDURE:

Each chart will be reviewed by one of the billing staff and logged with identifying information, regarding whether or not products of conception were noted on patient chart, if the specimen was not adequate and sent to pathology for review and if chorionic villi were or were not noted. As this chart review is done an answer of yes or no under heading of POC NOTED is all that is required. The same will be done for recovery area entry time and discharge time documentation on the patient's chart.

Each biller shall maintain an individual record indicating the above and at the end of each month, the logs will be compared with the logs maintained in the surgical area for comparison. This will be monitored by either the Practice Administrator or Clinical Support Staff Supervisor.

If the logs are found to match with no disparity, they will be attached to the back of the logs from the surgical area for that month. If a disparity is noted, verification of missing information will be located and an addendum to the patient's chart completed and signed off by performing physician.

APPROVED BY TAKEY CRIST, MD, FACOG, FACS

ORIGINALLY APPROVED ON JULY 27, 2015

SIGNATURE OF APPROVAL: Takey Crist, MD 07/27/2015

CRIST CLINIC FOR WOMEN

ORIGINAL EFFECTIVE DATE: JULY 27, 2015

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APPROVED BY TAKEY CRIST, MD, FACOG, FACS

ORIGINALLY APPROVED ON JULY 27, 2015

SIGNATURE OF APPROVAL: Takey Crist, MD 07/27/2015