

State of GA, Healthcare Facility Regulation Division

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>025-115</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____ <i>MAY 7 4 2015</i>	(X3) DATE SURVEY COMPLETED  <b>04/16/2015</b>
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NAME OF PROVIDER OR SUPPLIER  <b>SAVANNAH MEDICAL CLINIC</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>120 East 34th Street SAVANNAH, GA 31401</b>
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RECEIVED

(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
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U 000	Initial Comments.  A re-licensure survey was conducted on April 15, 2015. Savannah Medical Clinic was not in compliance with Chapter 290-5-32, Rules and Regulations for Performance of Abortions After the First Trimester of Pregnancy and Reporting Requirements for All Abortions. The following deficiencies were written as the result of that survey.	U 000		
U1007 SS=D	111-8-4-.10(g) Physical Plant and Operational Standards.  All procedure rooms shall be constructed, equipped, and maintained to assure the safety of patients and personnel.  This RULE is not met as evidenced by: Based on observation, record review and staff interview, the facility failed to maintain a sanitary environment to assure the safety of all patients.  Findings include:  Oservation on 4/14/2015 between 12:00 p.m. and 12:35 p.m.. revealed the operating room procedure table has stirrups (device used to position a patients legs in place during a procedure) wrapped with thick silver tape, which hinders the possibility to proper cleaning and disinfection.  Review of policy entitled, " Policy for physical environment maintenance" no policy number or revision date stipulates in the statement heading, "A physical environment maintenace policy is sufficient to keep the center and equipment in clean and tidy condition and in a state of good repair." There is no reference, included in the policy specifically addressing cleaing of the	U1007	The policy for physical environment maintenance will reference the cleaning of the stirrup holders and revision date. Protective barrier film will be used to cover and insure proper cleaning and disinfection of stirrup holders between patients.	5/4/15

State of GA Inspection Report  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*[Signature]*

TITLE (X6) DATE

Administrator / Representative 5/8/15

State of GA, Healthcare Facility Regulation Division

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U1007	Continued From page 1 equipment.  Interview on 4/14/2015 at 12:35 p.m. with the administrator confirmed the findings. [REDACTED] verbalized that "the tape is intended to hold the stirrups in place because, some patients legs are heavy."	U1007		
U1023 SS=D	111-8-4-.10(j) Physical Plant and Operational Standards.  All medical gases shall be stored in accordance with Bulletin 56A of the National Fire Protection Association.  This RULE is not met as evidenced by: Based on observation, record review and interview the facility failed to ensure proper storage of four (4) of four (4) medical gas cylinders (oxygen tanks).  Findings include:  Observation on 4/14/2015 between 1:30 P.M. and 2:45 p.m accompanied by the Adiminstrator and employee # 1 revealed four (4) of four (4) small gas oxygen cylinders located in the administrators office behind an opened door.  Review of policy entitled, "Policy for Physical Environment Maintenance" no policy number or revision date, failed to address storage of gas cylinders.  Interview on 4/14/2015 at 2:45 P.M. with the Administrator confirmed the finding.	U1023	(2) 2 cylinder D/E Oxygen Cylinder Cots have been purchased to accommodate and secure 4 gas cylinders. A policy has been written to address storage of all gas cylinders with revision date.	5/15/15

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U1027  U1027 SS=F	<p>Continued From page 2</p> <p>111-8-4-.10(n) Physical Plant and Operational Standards.</p> <p>Medicines shall be stored in a conveniently located cabinet with lock, and only licensed persons shall have access.</p> <p>This RULE is not met as evidenced by: Based on observation, record review and interview the facility failed to store medications in a locked cabinet where only licensed persons can have access.</p> <p>Findings include:</p> <p>Observation on 4/14/2015 between 1:30 P.M. and 2:45 P.M. revealed the following medications stored in an unlocked cabinet in the administrators office, where unlicensed personnel had access to.</p> <p>19 vials - Lidocaine 50 ml, Expiration date 12/1/15, Lot #45-183 EV 20 vials - NS 0.9%, Expiration date 3/1/16, Lot 39-565-DK 10 vials - Midazolam IM injection 50mg/10ml, Expiration 10/1/16, Lot 46-388-DK 1 - 500 tablet bottle of Ibuprofen 800mg, Expiration 06/16, Lot#AF 27414 2 - Bottles Equate Acetaminophen 500 mg 250 tabs, Expiration 1/2017 20 - Medroxyprogesterone 150mg/ml, Expiration 11/15 20 - Misoprostol 200 mcg (8 tabs each bottle), Expiration 6/16 10 - Fentanyl citrate 250mg/5 ml ampules</p>	U1027  U1027	<p>All medicines will be stored in a conveniently located cabinet with lock and only licensed personnel has access.</p> <p>All medications observed have been removed from unlocked cabinet and stored in locked cabinets.</p>	5-6-15

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**SAVANNAH MEDICAL CLINIC**

**120 East 34th Street  
SAVANNAH, GA 31401**

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U1236	Continued From page 3	U1236		
U1236 SS=D	<p>111-8-4-.12(6) Records.</p> <p>Patient records shall be current and shall be entitled to the same protection as provided for any medical records under Georgia law.</p> <p>Authority O.C.G.A. Secs. 31-2-4 et seq. and 31-7-1 et seq. Administrative History. Original Rule entitled "Records" was filed on January 22, 1980; effective March 1, 1980, as specified by the Agency.</p> <p>This RULE is not met as evidenced by: Based on observation review of facility policies and procedures and staff interview the facility failed to ensure the privacy and security of patient protected health information.</p> <p>Findings include:</p> <p>Observation on 4/14/2015 at 2:45 P.M. in the administrators office reveals approximately 75 patient medical records lying on top of a cabinet.</p> <p>Review of policy entitled, "Policy for Medical Records, no policy number, no revision date stipulates, "Medical records are required to be kept by the rules and regulations of the Georgia Department of Human Resources, using HIPPA guidelines."</p> <p>Interview on 4/14/2014 at 2:45 P.M. the Administrator confirmed the records are placed there for next day procedures and confirmed that all staff, including the facility's after hours cleaning crew, had access to these health records.</p>	U1236	<p>There is no after hours cleaning of any other service at the facility. One cleaning comes during specific morning hours on days when clients are not present and an office staff member is present. [redacted] has no access to any patient records nor does any staff member not immediately working on a particular patient record.</p>	5/6/15

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U1600 U1600 SS=F	<p>Continued From page 4</p> <p>111-8-4-.16 Drug Storage and Dispensing.</p> <p>Each center shall provide adequate space and equipment and staff to assure that drugs are stored and administered in compliance with State and Federal laws and regulations.</p> <p>Authority O.C.G.A. Secs. 31-2-4 et seq. and 31-7-1 et seq.. Administrative History. Original Rule entitled "Drug Storage and Dispensing" was filed on January 22, 1980; effective March 1, 1980, as specified by the Agency.</p> <p>This RULE is not met as evidenced by: Based on observation, record review and interview, the facility failed to assure that drugs are stored and administered in compliance with State and Federal laws and regulations.</p> <p>Obervation 4/14/2015 between 1:30 p.m. and 2:45 P.M. revealed inside an unlocked cabinet in the Administrators office, storage of 1000 tablet bottle of one ( 1) Diazepan 5 mg 1/3 full (a narcotic medication used to treat anxiety, muscle spasms and other medical conditions),</p> <p>Review of policy entitled" Policy For Handing of Narcotcs" no policy number, no revision date stipulates, "All DEA schedule 11, 111, IV and V controlled substances shall be secured in a locked narcotics cabinet and accounted for."</p> <p>Interview at the time of the discovery with the administrator and employee #1 confirmed the findings.</p>	U1600 U1600	<p>All medicines will be stored in a conveniently located cabinet with locks and only licensed personnel shall have access. All medications observed have been removed from unlocked cabinet and stored in locked narcotics cabinets.</p>	5-6-15

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V 000	<p>Opening Comments</p> <p>A re-licensure survey was conducted on 4/16/15, Savannah Medical Clinic was in compliance with Chapter 290-5-32, Rules and Regulations for Performance of Abortions After the First Trimester of Pregnancy and Reporting Requirements For All Abortions.</p>	V 000		

State of GA Inspection Report LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE <b>05/08/15</b>
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