

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AC13940024	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/08/2019
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NAME OF PROVIDER OR SUPPLIER ADVANCE WOMAN'S CARE CENTER, INC.	STREET ADDRESS, CITY, STATE, ZIP CODE 2742 SOUTHWEST 8TH STREET #20 MIAMI, FL 33147
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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
A 000	INITIAL COMMENTS A complaint investigation (C# 2019015403) was conducted at Advance Woman's Care Center on . The facility had deficiencies at the time of the survey.	A 000		
A 400	59A-9.027, FAC Recovery Rm Stand.-2nd Each clinic which is providing second shall comply with the following recovery room standards when providing second (1) Following the procedure, post procedure recovery rooms will be supervised and staffed to meet the patient's needs. A physician or physician assistant, a licensed registered nurse, a licensed practical nurse or an advanced registered nurse practitioner who is trained in the management of the recovery area shall be available to monitor the patient in the recovery room until the patient is discharged. The individual must be certified in basic . A patient in the post- or recovery room shall be observed for as long as the patient's condition warrants. (2) The clinic shall arrange hospitalization if any complication beyond the medical capability of the staff occurs or is suspected. The clinic shall ensure that all appropriate equipment and services are readily accessible to provide appropriate emergency resuscitative and life support procedures pending the transfer of the patient or a viable to the hospital. A physician shall sign the discharge order and be readily accessible and available until the last patient is discharged to facilitate the transfer of emergency cases if hospitalization of the patient or viable is necessary. The clinic medical records documenting care provided shall	A 400		

AHCA Form 3020-0001 LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X8) DATE
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A 400	<p>Continued From page 1</p> <p>accompany the patient. These records will include the contact information for the physician who performed the procedure at the clinic.</p> <p>(3) A physician shall discuss Rho (D) _____ with each patient for whom it is indicated and will ensure that it is offered to the patient in the immediate _____ period or that it will be available to the patient within 72 hours following completion of the _____ procedure. If the patient refuses the Rho (D) _____, refusal Form 3130-1002, _____, "Refusal to Permit Administration of (D) _____", herein incorporated by reference, shall be signed by the patient and a witness, and shall be included in the patient's medical record. The form can be obtained by written request from the Agency for Health Care Administration, Hospital and Outpatient Services Unit, Mail Stop #31, 2727 Mahan Drive, Tallahassee, Florida 32308, or from the agency website at: http://ahca.myflorida.com/MCHQ/Health_Facility_Regulation/Hospital_Outpatient/ _____ .shtml.</p> <p>(4) Written instructions with regard to post _____ coitus, signs of possible medical complications, and general aftercare shall be given to each patient. Each patient shall have specific written instructions regarding access to medical care for complications, including a telephone number to call for medical emergencies. The physician will ensure that either a registered nurse, licensed practical nurse, advanced registered nurse practitioner, or physician assistant from the _____ clinic makes a good faith effort to contact the patient by telephone, with the patient's consent, within 24 hours after surgery to assess the patient's recovery. A contact for post- _____ care from the facility shall be available to the patient on a</p>	A 400		

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A 400	<p>Continued From page 2</p> <p>24-hour basis.</p> <p>(5) Facility procedures must specify the minimum length of time for recovery as warranted by the procedure type and _____ period.</p> <p>This Statute or Rule is not met as evidenced by: Based on record review and interview, the clinic failed to comply with recovery room standards for second _____, as the recovery room staff member at the clinic has an expired certification in Basic _____ (_____).</p> <p>Findings include:</p> <p>Record review on _____ at 12:39 pm, revealed a personnel list of all active employees. One of the listed employees was a Recovery Room Assistant. Further record review revealed the Recovery Room Assistant does not have a current Basic _____ (_____) certification. The _____ certification expired _____.</p> <p>The Recovery Room Assistant stated that she is the person that assist the women after the procedure and she takes and monitors the vitals in the room.</p> <p>Interview on _____ at 12:41 pm, the Office Manager stated she was not aware her certification had expired.</p> <p>Interview on _____ at 12:45 pm, the Office Manager acknowledged the clinic failed to maintain a current _____ certification for staff working in the recovery room.</p>	A 400		