

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  15C0001059		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		X3) DATE SURVEY COMPLETED  11/08/2012	
NAME OF PROVIDER OR SUPPLIER  MUNSTER SAME DAY SURGERY CENTER				STREET ADDRESS, CITY, STATE, ZIP CODE 761 45TH ST STE 116 MUNSTER, IN 46321			
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Q0000	<p>This visit was for a recertification survey.</p> <p>Facility Number: 009232</p> <p>Survey Date: 11/07/2012 &amp; 11/08/2012</p> <p>Surveyors: ReBecca Lair, LCSW Medical Surveyor</p> <p>Jacqueline Brown, RN Public Health Nurse Surveyor</p> <p>QA: cloughlin 11/15/12</p>			O0000			

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

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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Q0181	<p>416.48(a) ADMINISTRATION OF DRUGS Drugs must be prepared and administered according to established policies and acceptable standards of practice. Based on observation, policy and procedure review, and staff interview, the facility failed to implement its policies and procedures related to drug storage, labeling, and handling in 3 of 3 (Post Anesthesia Care Unit {PACU}, Operating Suite One, and Endoscopy Room) areas toured.</p> <p>Findings:</p> <p>1. While on tour 11/8/12 at approximately 9:30 AM while in the company of personnel P5 and P8, the following was observed:</p> <p>A. in the PACU area crash cart, one Magnesium Sulfate 25 gm/50 ml, lot #0552, expiration 8/2012.</p> <p>B. in Operating Suite One:</p> <p>a. one Lidocaine HCl 2%, 20 mg/ml, lot #16-004-DK, opened and lacking a date item was opened.</p> <p>b. one Neostigmine Methylsulfate, 0.5 mg/ml, lot #061431, opened and lacking a date item was opened.</p> <p>C. in the Endoscopy Room:</p> <p>a. one Labetalol Hydrochloride, 200 mg/40 ml, lot #09395DD, opened 9/7/12 which is greater than 28 days.</p> <p>b. one Atropine Sulfate, 0.4 mg/ml, lot</p>	00181	Munster Same Day Surgery will correct the deficiency by reviewing the policy on Pharmaceutical Services Drug Procurement/Inventory Control, specifically the multi-dose vials and labeling of the vials. Also, enforcement on the monthly checklist that is a current tool used to help monitor and track both expired drugs and multi-dose vials. An in-service was presented on November 14th, 2012 to all clinical staff. The in-service identified the deficiencies found during the survey as well as the policy review. Examples were given during the in-service of labeling the meds and timeframe. Anesthesia was included on the in-service as well, due to many of the deficiencies were identified in the anesthesia cart areas. To prevent future deficiencies, Munster Same Day Surgery has reviewed the monthly worksheet/checklist and having the team members sign off on the worksheet to ensure accountability for each of their areas. The Director of the OR and Director of PAACU will be responsible overseeing no further deficiencies for the facility.	11/14/2012			

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	<p>#021314, opened 9/21/no year documented, which is greater than 28 days.</p> <p>c. one Dexamethasone Sodium Phosphate, 4 mg/ml, lot #6103043, opened 9/21/no year documented, which is greater than 28 days.</p> <p>2. Policy No. 2008, titled "Pharmaceutical Services Drug Procurement/Inventory Control" reviewed at 11:38 AM on 11/8/12, indicated on pg. 2, points 6, 8, and 13, "Multi-dose vials will be labeled with the date of opening and will be considered safe for use for 28 days or manufacturer's expiration date, whichever occurs first...Damaged medications - All medications will be considered damaged if: the seal is broken; the label is not legible; the medication has not been stored properly; visible contamination; expired per manufacturer's recommendations; and no date on multi-dose vial...All medication areas will be monitored monthly for medications that will outdate during the subsequent month. These medications will be removed from the clinical area, stored in the DON's (Director of Nursing) office (container marked 'Expired Drugs') until returned to the pharmaceutical company for disposal."</p> <p>3. Personnel P5 was interviewed at</p>						

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	<p>approximately 9:45 AM on 11/8/12 and indicated, facility policy and procedure is not being followed related to the removal of damaged and/or expired medications. And the above-mentioned multi-dose vials were either not labeled or mislabeled when opened, therefore, it cannot be determined whether or not they were past 28 days from the date opened as required per facility policy and procedure.</p>			

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S0000	<p>This visit was for a standard licensure survey.</p> <p>Facility Number: 009232</p> <p>Survey Date: 11/07/2012 &amp; 11/08/2012</p> <p>Surveyors: ReBecca Lair, LCSW Medical Surveyor</p> <p>Jacqueline Brown, RN Public Health Nurse Surveyor</p> <p>QA: claughlin 11/15/12</p>	S0000			

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S1000	<p>410 IAC 15-2.5-6 PHARMACEUTICAL SERVICES 410 IAC 15-2.5-6</p> <p>The center shall provide drugs and biologicals in a safe and effective manner, in accordance with accepted professional practice, and under the direction of an individual designated responsible for pharmaceutical services. Pharmaceutical services must have the following: Based on observation, policy and procedure review, and staff interview, the facility failed to implement its policies and procedures related to drug storage, labeling, and handling in 3 of 3 (Post Anesthesia Care Unit {PACU}, Operating Suite One, and Endoscopy Room) areas toured.</p> <p>Findings:</p> <p>1. While on tour 11/8/12 at approximately 9:30 AM while in the company of personnel P5 and P8, the following was observed:</p> <p>A. in the PACU area crash cart, one Magnesium Sulfate 25 gm/50 ml, lot #0552, expiration 8/2012.</p> <p>B. in Operating Suite One:</p> <p>a. one Lidocaine HCI 2%, 20 mg/ml, lot #16-004-DK, opened and lacking a date item was opened.</p> <p>b. one Neostigmine Methylsulfate, 0.5 mg/ml, lot #061431, opened and lacking a</p>	S1000	<p>Munster Same Day Surgery will correct the deficiency by reviewing the policy on Pharmaceutical Services Drug Procurement/Inventory Control, specifically the multi-dose vials and labeling of the vials. Also, enforcement on the monthly checklist that is a current tool used to help monitor and track both expired drugs and multi-dose vials. An in-service was presented on November 14th, 2012 to all the clinical staff. The in-service identified the deficiencies found during the survey as well as the policy review. Examples were given during the in-service of labeling the meds and timeframe. Anesthesia was included on the in-service as well, due to many of the deficiencies were identified in the anesthesia cart areas. To prevent future deficiencies, Munster Same Day Surgery has reviewed the monthly worksheet/checklist and having he team members sign off on the worksheet to ensure</p>	11/14/2012			

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