

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 150021	X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____	X3) DATE SURVEY COMPLETED 09/19/2012
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NAME OF PROVIDER OR SUPPLIER PARKVIEW REGIONAL MEDICAL CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 11109 PARKVIEW PLAZA DRIVE FORT WAYNE, IN 46805
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S0000	<p>This visit was for investigation of two State hospital complaints.</p> <p>Complaint Numbers: IN00108802: Unsubstantiated, lack of sufficient evidence</p> <p>IN00113489: Substantiated: deficiency cited related to the allegations</p> <p>Date: 9/17/12 to 9/19/12</p> <p>Facility Number: 005020</p> <p>Surveyor: Linda Plummer, R.N., Public Health Nurse Surveyor</p> <p>QA: claughlin 11/27/12</p>	S0000		

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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S0930	<p>410 IAC 15-1.5-6 NURSING SERVICE 410 IAC 15-1.5-6 (b)(3)</p> <p>(b) The nursing service shall have the following:</p> <p>(3) A registered nurse shall supervise and evaluate the care planned for and provided to each patient.</p> <p>Based on patient medical record review, and staff interview, the nursing executive failed to ensure that nursing staff evaluated and cared for patients in relation to nutritional needs for one patient (pt. #15).</p> <p>Findings:</p> <p>1. review of patient medical records at 11:15 AM and 12:30 PM on 9/19/12 indicated:</p> <p>a. pt. #15:</p> <p>A. was admitted to the nursing floor at 8:12 PM on 7/26/12.</p> <p>B. took in 150 cc orally at 9:47 PM on 7/26/12</p> <p>C. per the admission orders at 8:22 PM on 7/26/12, was made NPO (without food/drink) at midnight on 7/26/12 in preparation of possible surgery on 7/27/12</p> <p>D. had a consultation that was performed at 10:18 PM on 7/26/12 by the Internal Medicine specialist who indicated in the "Impression" section of the report: "1. Penetrating aortic ulcer, uncertain duration..."</p>	S0930	<p><u>How are we going to correct the deficiency?</u></p> <p>The Nursing Services manager met with the Hospitalist physician group on 12/10/12 and provided education regarding the need to assess the patient's NPO status and nutritional status during the evaluation for surgery/procedure process.</p> <p>The Nursing Services manager educated the staff members of the unit regarding the need to assess the patient's nutritional and hydration status at regular intervals during the evaluation for surgery/procedure process. Education was completed on 12/11/12 and 12/13/12.</p> <p><u>How are we going to prevent the deficiency from recurring in the future?</u></p> <p>The unit based Case Managers will flag the charts of all patients being evaluated for Vertebroplasty. The Nursing Services manager will review each chart to insure that the patient's nutritional status was assessed.</p>	12/13/2012	

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	<p>E. on 7/27/12 at 11:23 AM, a Cardiovascular Surgery consult was performed and indicated in the "Recommendations" section: "At the patient's age...overall status dictates conservative therapy for [pt's] penetrating ulcer.</p> <p>F. had other physician consults and progress notes documented on 7/27/12 in the patient record with a "hold" placed on the 7/28/12 discharge about 10:30 AM until Cardiology could consult with the patient</p> <p>G. the cardiology consult was performed from 11:30 AM to 12:00 PM on 7/28/12</p> <p>H. per the discharge instruction forms, the patient was discharged about 1:30 PM on 7/28/12</p> <p>I. pt. #15 medical record lacked documentation of food or fluids provided after midnight, 7/26/12 and lacked documentation to indicate need for continued holding of food and fluids once it was decided there would be no surgery</p> <p>2. Interview with staff member NA, quality and risk staff member, at 4:00 PM 9/19/12, indicated:</p> <p>a. it is unclear why the patient was not ordered, and offered, nutrition once it was determined there would be no surgery due to the patient's age and physical status on 7/27/12 at 11:23 AM</p>		<p><u>Who is responsible for the above?</u> The Nursing Services manager is responsible.</p> <p><u>By what date are we going to have the deficiency corrected?</u> 12/13/12 -</p>		

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	b. the patient could also have had food offered prior to discharge on 7/28/12 as all tests were completed and it was clear there was to be no surgery for the patient			