

## CMS Medicare Certified Ambulatory Surgery Centers Washington State

# Areas of State Operations Manual (SOM) Appendix L cited most often January 1, 2014 through June 30, 2014

#### Reference:

http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/som107 appendixtoc.pdf Information based on 27 surveys completed top six violations most often cited

Cited 20 Times

Q-0241

(Rev. 56, Issued: 12-30-09, Effective/Implementation: 12-30-09)

§416.51(a) Standard: Sanitary Environment

The ambulatory surgery center (ASC) must provide a functional and sanitary environment for the provision of surgical services by adhering to professionally acceptable standards of practice.

**Observations resulting in citation:** Surgical masks hanging around the necks and entering OR for a procedure using the same mask; Card board shipping containers in the OR; laryngoscope blades outside of clean packaging; opening medication vial and not disinfecting the rubber septum prior to piercing with needle; and improper hand hygiene.

Cited 20 Times

Q-0220

(Rev. 95, Issued: 12-12-13, Effective: 06-07-13, Implementation: 06-07-13) §416.50

The ASC must also post the written notice of patient rights in a place or places within the ASC likely to be noticed by patients waiting for treatment or by the patient's representative or surrogate, if applicable. Interpretive Guidelines: §416.50 (standard-level citation only)

**Observations resulting in citation:** Patient rights document failed to include updated complaint contact information for Medicare; did not contain the patient's right to exercise their rights without fear of discrimination or reprisal; right to be free from all forms of abuse and harassment.

Cited 20 Times

Q-0221

(Rev. 95, Issued: 12-12-13, Effective: 06-07-13, Implementation: 06-07-13) §416.50(a) Standard: Notice of Rights

An ASC must, prior to the start of the surgical procedure, provide the patient, or the patient's representative, or the patient's surrogate with verbal and written notice of the patient's rights in a language and manner that ensures the patient, the representative, or the surrogate understand all of the patient's rights as set forth in this section. The ASC's notice of rights must include the address and telephone number of the state agency to which patients may report complaints, as well as the website for the Office of the Medicare Beneficiary Ombudsman.

**Observation resulting in citation:** Patient Rights documents failed to include information for Department of Health complaint intake; the right to exercise their rights and file a grievance without fear of discrimination or reprisal. Similar information listed above.

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Cited 19 Times

Q-0162

(Rev. 95, Issued: 12-12-13, Effective: 06-07-13, Implementation: 06-07-13)

§416.47(b) Standard: Form and Content of Record

The ASC must maintain a medical record for each patient. Every record must be accurate, legible and promptly completed. Medical records must include at least the following:

- 1) Patient identification;
- 2) Significant medical history and results of physical examination;
- 3) Pre-operative diagnostic studies (entered before surgery), if performed;
- 4) Findings and techniques of the operation including a pathologist's report on all tissues removed during surgery, except those exempted by the governing body;
- 5) Any allergies and abnormal drug reactions; (6) Entries related to anesthesia administration;
- 6) Documentation of properly executed informed patient consent; and
- 7) Discharge diagnosis.

Use of unapproved abbreviation in medical records; missing documentation of patient's advance directive status; missing signatures, initials, documents missing place for time; missing evidence of post-procedure assessments; missing evidence of discharge orders.

Cited 18 Times

Q-0181

(Rev. 56, Issued: 12-30-09, Effective/Implementation: 12-30-09)

§416.48(a) Standard: Administration of Drugs

Drugs must be prepared and administered according to established policies and acceptable standards of practice

The use of range orders that do not delineate which medication should be given or the parameters for choosing a dose within the range. Controlled substances left unsecured and available to all staff members; unlabeled medication syringes. Open MDV with no initials or date of when medication was opened; Logs were not numbered in a way to identify loss or diversion of controlled substances.

Cited 16 Times

Q-0101

(Rev. 99 Issued: 01-31-14, Effective: 01-31-14, Implementation: 01-31-14) §416.44(a) Standard: Physical Environment

The ASC must provide a functional and sanitary environment for the provision of surgical services.

 Each operating room must be designed and equipped so that the types of surgery conducted can be performed in a manner that protects the lives and assures the physical safety of all individuals in the area.

Normal wear and tear in a facility that creates non-cleanable surfaces; gaps around lighting, cabinets and other areas that create spaces that are not cleanable; improper air flow relationships.

### With questions or comments, please contact:

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