

Health Standards Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: BO0004642	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/09/2007
NAME OF PROVIDER OR SUPPLIER DELTA CLINIC OF BATON ROUGE, INC		STREET ADDRESS, CITY, STATE, ZIP CODE 756 COLONIAL DRIVE BATON ROUGE, LA 70806		
(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
S 000	Explicit Statements-01 An un-announced licensing survey was conducted on 10/09/2007.	S 000		
S4415	PATIENT RECORDS AND REPORTS This Rule is not met as evidenced by: §4415. Patient Records and Reports B. Content of Medical Record 1. The following minimum data shall be kept on all patients: a. identification data; b. date of procedure; c. medical and social history; d. physical examination; e. chief complaint or diagnosis; f. clinical laboratory reports (when appropriate); g. pathology report (when appropriate); h. physicians orders; i. radiological report (when appropriate); j. consultation reports (when appropriate); k. medical and surgical treatment; l. progress notes, discharge notes, and summary; m. nurses' records of care given, including medication administration records; n. authorizations, consents or releases; o. operative report; p. anesthesia report, including post-anesthesia report; and q. special procedures reports. Based on medical record review, policy review, and interview the facility failed to ensure the medical record contained a physical examination for 9 of 10 patient records reviewed (patient #1, #2, #3, #4, #5, #6, #7, #9, #10). Findings:	S4415		

DHH/Health Standards Section

TITLE

(X6) DATE

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

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S4415	<p>Continued From page 1</p> <p>Review of the facility policy titled, "Patient Records/Patient Records Contents (no documented date of adoption)" presented by the facility as their current policy revealed in part, "Each Medical Record will contain 4) Physical examination."</p> <p>Reivew of medical records revealed the following:</p> <p>Patient #1 was admitted to the facility for an abortion on 5/30/2007. Patient #1 was sedated but unable to tolerate the abortion procedure. Further review of Patient #1's medical record revealed no documented evidence of a physical examination.</p> <p>Patient #2 was admitted to the facility for an abortion (uterine size 10 weeks) on 10/05/2007. Further review of Patient #2's medical record revealed no documented evidence of a physical examination</p> <p>Patient #3 was admitted to the facility for an abortion (uterine size 16 weeks) on 9/28/2007. Further review of Patient #3's medical record revealed no documented evidence of a physical examination</p> <p>Patient #4 was admitted to the facility for an abortion (uterine size 12 weeks) on 8/17/2007. Further review of Patient #4's medical record revealed no documented evidence of a physical examination</p> <p>Patient #5 was admitted to the facility for an abortion (uterine size 9 weeks) on 8/03/2007. Further review of Patient #5's medical record revealed no documented evidence of a physical examination</p>	S4415		

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S4415	Continued From page 2 Patient #6 was admitted to the facility for an abortion (uterine size 15 weeks) on 7/27/2007. Further review of Patient #6's medical record revealed no documented evidence of a physical examination Patient #7 was admitted to the facility for an abortion (uterine size 8 weeks) on 6/27/2007. Further review of Patient #7's medical record revealed no documented evidence of a physical examination Patient #9 was admitted to the facility for an abortion (uterine size 8 weeks) on 9/21/2007. Further review of Patient #9's medical record revealed no documented evidence of a physical examination Patient #10 was admitted to the facility for an abortion (uterine size 10 weeks) on 9/07/2007. Further review of Patient #10's medical record revealed no documented evidence of a physical examination. During an interview on 10/10/2007 at 1:00 p.m., the Medical Director and the Facility Administrator indicated the facility did not perform physical examinations of patients at the facility. Both confirmed there were no physicals located on the charts of any of the medical records reviewed by the surveyors. The Administrator indicated a medical history is taken by the medical assistants on the counseling day prior to having a procedure. The Medical Director indicated physicians examine the uterus prior to the procedure but do not perform a physical examination.	S4415			