

SURVEYOR NOTES WORKSHEET

Facility Name: Care Services Surveyor Name: Charles L. H.
CCN: AS0924 Surveyor Number: 2282 Discipline: PM
Observation Dates: From 3/12 To 3/13/13

TOUR

1. No smoking sign in conspicuous place	<input checked="" type="checkbox"/>
2. Privacy, dignity	<input checked="" type="checkbox"/>
3. Call system --OR, RR, toilet facilities	<input checked="" type="checkbox"/>
4. Storage/Chemicals, hazardous, wastes and flammable materials	<input checked="" type="checkbox"/>
5. Medical Records store confidentially six years or according to facility policy fire and water safe	<input checked="" type="checkbox"/> 1-16
6. ASC complaint hotline number posted	<input checked="" type="checkbox"/>
7. MD present in ASC at all times when patients are receiving treatment until they are discharged from post anesthesia care	<input checked="" type="checkbox"/>
8. 2 nurses present in facility, one with ACLS in recovery room	<input checked="" type="checkbox"/>
9. RN on call	<input checked="" type="checkbox"/>
10. Drug storage adequate space, equipment narcotic count, and double lock No expired drugs	<input checked="" type="checkbox"/> verse 1
11. Equipment accessible to OR/RR airways, cardiac monitoring, ventilator breathing bag, laryngoscopes, ET tubes CPR drugs, Suction equipment, Tracheostomy, Emergency medical equipment & supplies specified by the medical staff	<input checked="" type="checkbox"/>
12. Space not mixed with other functions and operations in a common space during concurrent or overlapping hours	<input checked="" type="checkbox"/>
13. Access to OR and RR limited	<input checked="" type="checkbox"/>
14. Conform to aseptic technique	<input checked="" type="checkbox"/>
15. Cleaning between cases	<input checked="" type="checkbox"/>
16. OR dress-hair protection	<input checked="" type="checkbox"/>
17. Equipment for rapid and routine sterilization	<input checked="" type="checkbox"/>
18. Sterile packs labeled stored marked with expiration date	<input checked="" type="checkbox"/>
19. Facility is safe/sanitary/properly constructed/equipped and maintained to protect health and safety of patients – space, lighting, furniture	<input checked="" type="checkbox"/>
20. OR—designed and equipped to protect lives and assures the physical safety of individuals	<input checked="" type="checkbox"/>
21. Suction equipment	<input checked="" type="checkbox"/>
22. Evacuation routes posted	<input checked="" type="checkbox"/>

Surveyor Name: _____

Surveyor Number:_____ **Discipline:**_____

TAG/CONCERNS

DOCUMENTATION

Retour: 3/13/13

3:40pm OR Skips not covered

3:00 pm Mary states the Dr. leaves at the end of the day sometimes before all pts are gone.



0924AS
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APPOINTMENT
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1-800-858-8980

March 16, 2013

Dr. Mohamed Rezaee and Carol Westfall discussed the State of OHio Citations. Dr. Rezaee, agreed that a physician should be present until the last patient has been discharged and has left the building. He stated that he would remain on the premises until all patients were gone from the facility.

March 28, 2013

Carol Westfall met with Dr. Lee Rubinstein, Medical Director of the Cleveland Surgi-Center and we discussed all the State of OHio violations from the State inspection on March 12, and 13 2013. We prepared answers to all citations, which had already been corrected. Dr. Rubinstein also agreed that the physician must stay on the premise until all patients have been discharged and have left the building

The discharge of patients will be monitored by myself or by Mary Schatzman DON in my absence.


Carol A. Westfall Executive Director


Mary Schatzman RN, NP DON