STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	C6301	A. BUILDING: _____ B. WING _____	01/28/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WEST ALABAMA WOMEN'S CENTER, INC	535 JACK WARNER PARKWAY, SUITE I TUSCALOOSA, AL 35404

(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
L 200	ALABAMA LICENSURE DEFICIENCIES This Rule is not met as evidenced by: 420-5-1-.02 Administration. (8) Records and Reports. (a) Medical Records to be kept. An abortion facility shall keep adequate records, including procedure schedules, histories, results of examinations, nurses' notes, records of tests performed, copy of report of abortion made to the Center for Health Statistics, and all forms required by law. This rule is not met as evidenced by: Based on clinic policy, an interview and review of medical records the clinic staff failed to completely document care and services provided to patients related to lab work and operative reports. This had the potential to affect all patients served. Findings include: Clinic Policy: Documentation in the medical record Audit of the Chart "Completeness of the procedure must be verified and documented." Medical Record Findings: 1. Medical Record (MR) # 10, presented to the clinic on 9/21/15 for a surgical abortion procedure. The operative note failed to include the size of the suction cannula that was inserted	L 200		

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L 200	Continued From page 1 into the uterine cavity. 2. Medical Record # 18, presented to the clinic on 10/24/15 for lab work prior to her abortion procedure. The clinic lab sheet / ultrasound results form failed to document the hemoglobin or hematocrit results. All of the other laboratory information was completed on the form. MR # 18 was referred to another clinic for her procedure and did not receive a procedure at West Alabama Women's Center. 3. Medical Record # 6 presented to the clinic on 12/12/15 for a surgical abortion procedure. The operative note failed to include the size of the suction cannula that was inserted into the uterine cavity and if the uterine contents were manually or electrically aspirated. 4. MR # 19 presented to the clinic on 8/13/15 for a surgical abortion procedure. The operative note failed to document the estimated blood loss amount and if the products of conception appeared normal or abnormal. 5. MR # 9 presented to the clinic 8/19/15 for a surgical abortion procedure. The patient was transferred to the hospital in respiratory distress. A MD (Medical Doctor) note was present in the medical record not dated and/or signed with a last name or credentials of the writer. A second note was in the medical record regarding MR # 9, dated 8/21/15 with no time to indicate when the note was written or by whom. 6. MR # 5 presented to the clinic 3/11/15 for a surgical abortion procedure. The operative note	L 200		

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L 200	Continued From page 2 failed to document fetal age weeks, the condition the patient was in when she was sent to the recovery room, if the products of conception was normal for the gestational age, if the patient requested to see products of conception and if pregnancy tissue was seen. In an interview on 1/28/16 at 1:30 PM with The Clinic Administrator, Employee Identifier (EI) # 1, confirmed the documentation omissions for the above records reviewed. 420-5-1-.03 Patient Care. (5) Operative Procedures. (c) Before a physician performs an abortion, the physician shall examine the fetus by use of ultrasound and by such other techniques as to produce a reasonably accurate method of determining the gestational age, viability of the fetus and the intrauterine location. After such examination, the physician shall enter into the patient's medical record the tests or examinations performed, and his findings regarding viability and intrauterine location. If the physician determines that the fetus is viable, the pregnancy shall not be terminated at the abortion or reproductive health center except when an immediate abortion is necessary to preserve the life or physical health of the mother. This rule is not met as evidenced by: Based on review of medical records and an interview the clinic failed to assure the physician documented prior to performing an abortion, on its own form, if the fetus was viable. This had the potential to affect all patients served by the clinic	L 200		

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L 200	Continued From page 3 and did affect 16 of 22 records reviewed. Findings include: A review of medical records revealed the clinic form titled, "Lab Sheet/Ultrasound Results" had an area for the physician to document the fetus as either viable or non-viable. During the review of medical records survey staff confirmed the physician failed to document the viability in 16 records reviewed. This affected Medical Records (MR) # 1, MR # 2, MR # 3, MR # 4, MR # 5, MR # 6, MR # 7, MR # 8, MR # 9, MR #10, MR # 11, MR # 12, MR #13, MR # 14, MR # 15 and MR # 19. In an interview on 1/28/16 at 1:30 PM with The Clinic Administrator, Employee Identifier (EI) # 1, confirmed the documentation omissions for the above records reviewed. None of the above MR gestational weeks was 19 or greater. 420-5-1-.04 Physical Environment. (6) Equipment and Supplies. (d) Medications and supplies which have deteriorated or reached their expiration dates shall not be used for any reason. All expired or deteriorated items shall be disposed of promptly and properly. Each facility shall examine all stored medications and supplies no less frequently than once each month and shall remove from its inventory all deteriorated items and all items for which the expiration date has been reached. The facility shall maintain a log recording each such examination with its date, time, the person conducting the examination, and	L 200		

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L 200	Continued From page 4 a description of each item or group of items removed from inventory and the reason for such removal. This rule is not met as evidence by: Based on observations the facility failed to assure all patient supplies were not expired. This affected two patient exam rooms, the sterile processing room, and one cabinet used for general medical supply storage. This had the potential to affect all patients served. Findings include: On 1/25/16 at 9:25 AM survey staff conducted a tour of the clinic. In a medical supply storage cabinet located across the hall from exam room 2 the surveyor identified the following flexible Karmen cannula that expired 12/2015: Size 7 French = 4 Size 8 French = 3 Size 9 and 10 French = 6 Size 12 French = 2 In a medical supply storage cabinet located in exam room 2 the surveyor identified the following flexible 6 mm (millimeter) curettes that expired 10/2015: Size 6 mm= 16 On 1/25/16 at 9:50 AM during a tour of exam room 1, survey staff identified 46 size 6 millimeters disposable rigid curettes that expired 10/2015. On 1/25/16 at 10:05 AM survey staff toured the sterile processing room and identified the Sporox	L 200		

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L 200	Continued From page 5 II sterilizing and disinfecting solution, lot number 131205, expired 12/2015.	L 200		