STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	056425	A. Building B. Wing	12/02/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Studebaker Healthcare Center	13226 Studebaker Rd Norwalk, CA 90650

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0773 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide or obtain laboratory tests/services when ordered and promptly tell the ordering practitioner of the results. (continued on next page)

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0773 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the facility failed to ensure abnormal laboratory (lab) results, provided to the facility on 9/9/2025, for one of three sampled residents (Resident 1) were reported to Resident 1's physician in a timely manner and a response from the physician with instructions for care was obtained. This deficient practice resulted in Resident 1's physician not being made aware of Resident 1's abnormal lab results when they were reported to the facility on 9/9/2025, until 9/10/2025, and a delay in transferring Resident 1 to the GACH (9/10/2025). Resident 1 was assessed and treated for severe dehydration (a life threatening emergency where the body has lost critical amounts of water and electrolytes that can cause serious damage to the kidneys, heart and brain), hypernatremia (a condition where the concentration of sodium in the body is abnormally high), and hypotension (a medical condition caused by low blood pressure). This deficient practice had the potential for more serious consequences related to Resident 1's abnormal lab results and a delay in evaluation and treatment to occur. Findings: During a review of Resident 1's admission Record (Face Sheet), the Face Sheet indicated Resident 1 was admitted to the facility on [DATE] with diagnosis including acute kidney failure (a condition when the kidneys lose their ability to remove waste and help balance fluids and electrolytes in the body), cerebral infarction (a condition where blood flow to the brain Is interrupted, causing brain tissue damage) and congestive heart failure ([CHF] a heart disorder which causes the heart not to pump the blood efficiently, sometimes resulting in leg swelling). During a review of Resident 1's Minimum Data Set ([MDS] a resident assessment tool) dated 9/9/2025, the MDS indicated Resident 1 was unable to make decisions that were reasonable and consistent. During a review of Resident 1's Physician Order dated 9/6/2025, the Physician Order indicated to obtain a Complete Blood Count ([CBC] a common blood test that counts and examines the types and numbers of blood cells to check for health problems), a Comprehensive Metabolic Panel ([CMP] a blood test that measures the overall health including metabolism, liver and kidney functions and electrolyte levels), a Hemoglobin A1C (a blood test that shows the average sugar level in the body for the past three months), a Keppra level (a blood test that measures the amount of an anti-seizure medication in the body), a digoxin level (a blood test that measure the amount of medication digoxin in the body) and a lipid panel (a blood test that measure different types of fats in the blood) for Resident 1 on 9/9/2025. During a review of the Resident 1's Lab Results, dated 9/9/2025, drawn at 5:06 a.m., and reported to the facility at 1:32 p.m. (9/9/2025), the Lab Results indicated the following abnormal results: a. [NAME] Blood Cell Count ([WBC] a blood cell that helps attack infection or injury in the body) 10.7 cells per microliter (cells/mcl) with a normal range between 4.0 cell/ul to 10.5 cells/ul b. Red Cell Distribution Width ([RDW] a test that measures the size of the red blood cells) of 15.3%, with a normal range between 11.6% to 14.4%. c. Mean Platelet Volume ([MPV] a test that measures the average size of the blood cells that stop bleeding) of 12.0 femtoliters (fl) with a normal range between 7.2 fl to 11.7 fl. d. Hemoglobin A1C (HgbA1C) of 6.6 percent, with a normal range between 4.6 to 5.6 percent. e. Digoxin level of 0.4 nanograms per deciliter (Ng/dl) with a normal range between 0.8 Ng/dl to 2.0 Ng/dl. f. Triglycerides (the main type of fat in the body) of 203 milligrams ([mg] a metric unit of measurement, used for medication dosage and/or amount)/per deciliter (mg/ dl) with a normal range of less than 150 mg/dl. g. High Density Cholesterol ([HDL] also known as good cholesterol) of 19 mg/dl, with a normal range of less than 40 mg/dl. h. Neutrophils (the most common type of white blood cell) Absolute (the actual number of disease fighting white blood cells) of 8.3 per mcl, with a normal range between 2.0 to 8.1 per mcl. i. Lymphocytes (a white blood cell that destroys bacteria and viruses) of 8.0 per mcl with a normal range between 14.0 to 52.0 per mcl. j. Monocytes (a white blood cell that destroys germs and eliminate infected cells in the body) of 12.0%, with a normal range between 1.0% to 11.0%. k. Monocytes Absolute of 1.3 thou/mcl, with a normal range between 0.0 thou/ul to 0.8 thou/ul. l. Sodium ([Na] an electrolyte that regulates fluid levels, transmits nerve signals in the body and contract muscles) level of 158 millimoles/liter (mmol/l) with a normal range between 136 mmol/l to 145 mmol/l. m. Chloride ([Cl] an electrolyte that maintains the fluid balance, blood pressure and acid-base balance in the body) level of 112 mmol/l, with a normal range between 98 mmol/l - 107 mmol/l. n. Electrolyte Balance (a state of the body when there is the right amount of minerals) of 15 mmol/l, with a normal range between 2 mmol/l to 12 mmol/l. o. Glucose (blood sugar [b/s]) level of 358 mg/dl with normal range between 85 mg/dl to 125 mg/dl. p. Blood Urea Nitrogen ([BUN] a test that reveals the function of the kidneys) of 150 mg/dl, with a normal range between 7 mg/dl to 25 mg/dl. q. Creatinine (a waste

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F 0842 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards. (continued on next page)

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F 0842 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the facility failed to ensure Licensed Vocational Nurse (LVN) 1 documented one of three sampled residents (Resident 1) laboratory (lab) results and communication of those lab results in Resident 1's medical record. This deficient practice resulted in an incomplete/inaccurate depiction of Resident 1's general well-being and had the potential for non-continuity of care. Findings: During a review of Resident 1's admission Record (Face Sheet), the Face Sheet indicated Resident 1 was admitted to the facility on [DATE] with diagnosis including acute kidney failure (a condition when the kidneys lose their ability to remove waste and help balance fluids and electrolytes in the body), cerebral infarction (a condition where blood flow to the brain Is interrupted, causing brain tissue damage) and congestive heart failure ([CHF] a heart disorder which causes the heart not to pump the blood efficiently, sometimes resulting in leg swelling). During a review of Resident 1's Minimum Data Set ([MDS] a resident assessment tool) dated 9/9/2025, the MDS indicated Resident 1 was unable to make decisions that were reasonable and consistent. 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Triglycerides (the main type of fat in the body) of 203 milligrams ([mg] a metric unit of measurement, used for medication dosage and/or amount)/per deciliter (mg/ dl) with a normal range of less than 150 mg/dl. g. High Density Cholesterol ([HDL] also known as good cholesterol) of 19 mg/dl, with a normal range of less than 40 mg/dl. h. Neutrophils (the most common type of white blood cell) Absolute (the actual number of disease fighting white blood cells) of 8.3 per mcl, with a normal range between 2.0 to 8.1 per mcl. i. Lymphocytes (a white blood cell that destroys bacteria and viruses) of 8.0 per mcl with a normal range between 14.0 to 52.0 per mcl. j. Monocytes (a white blood cell that destroys germs and eliminate infected cells in the body) of 12. 0%, with a normal range between 1.0% to 11.0%. k. Monocytes Absolute of 1.3 thou/mcl, with a normal range between 0.0 thous/ul to 0.8 thou/ul. l. Sodium ([Na] an electrolyte that regulates fluid levels, transmits nerve signals in the body and contract muscles) level of 158 millimoles/liter (mmol/l) with a normal range between 136 mmol/l to 145 mmol/l. m. Chloride ([Cl] an electrolyte that maintains the fluid balance, blood pressure and acid-base balance in the body) level of 112 mmol/l, with a normal range between 98 mmol/l - 107 mmol/l. n. Electrolyte Balance (a state of the body when there is the right amount of minerals) of 15 mmol/l, with a normal range between 2 mmol/l to 12 mmol/l. o. Glucose (blood sugar [b/s]) level of 358 mg/dl with normal range between 85 mg/dl to 125 mg/dl. p. Blood Urea Nitrogen ([BUN] a test that reveals the function of the kidneys) of 150 mg/dl, with a normal range between 7 mg/dl to 25 mg/dl. q. Creatinine (a waste product produced by muscle breakdown, which higher levels may indicate impaired kidney function) of 3.7 mg/dl, with normal range between 0.7 mg/dl to 1.3 mg/dl. r. Glomerular Filtration Rate ([eGFR] a measurement of how well the kidneys filter waste from the blood) of 17 ml/minute/1.73 square meters (sq/m), with a normal range of more than or equal to 60 ml/minute/1.73 sq/m. s. Albumin (a protein in the blood that maintains fluid balance in the body) of 4.0 grams (g)/dl, with a normal range between 4.2 g/dl to 5.5 g/dl. t. Aspartate Amino Transferase ([AST] a test used for monitoring the liver health overtime) of 201 u/l, with a normal range between 13 u/l to 39 u/l. u. Alanine Aminotransferase ([ALT] a test done to identify potential