STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	106066	A. Building B. Wing	07/01/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Oak Hammock at the University of Florida Inc	2660 SW 53rd LN Gainesville, FL 32608

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 0684 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide appropriate treatment and care according to orders, resident?s preferences and goals. Based on observation, interview, and record review, the facility failed to obtain the medication dosage prior to administration for 1 of 3 residents reviewed for pain management (Resident #86).Findings include:During an observation on 6/29/2026 at 12:16 PM, Resident #86 was sitting upright in the bed with family members at the bedside. The resident was rubbing her left leg, grimacing. During an interview on 6/29/2026 at 12:16 PM, Resident #86 stated, My leg hurts all over sometimes on the top, then the pain moves to the side. Right now, it's hurting right here [points to inner calf left leg]. I want my oxycodone on time. If they bring it late, then my pain gets really bad.Review of Resident #86's physician order dated 6/23/2026 read, Diclofenac Sodium External Gel 1% (Diclofenac Sodium (Topical)). Apply to painful areas to LLE [Left Lower Extremity] topically four times a day for pain. The required dosage for application was not documented.Review of Resident #86's Medication Administration Record for June 2026 for application of diclofenac sodium topical gel showed the resident received the medication from 6/23/2026 through 6/30/2026 at 9 AM, 1:00 PM, 5:00 PM, and 9:00 PM.During an interview on 6/30/2026 at 1:07 PM, Staff A, Licensed Practical Nurse (LPN), stated, Normal dose for Voltaren [Diclofenac Sodium external gel 1%] is 2-4 grams and the dosage should be written.During an interview on 6/30/2026 at 1:30 PM, the Director of Nursing verified there was no dosage written for Voltaren and should be included in physician orders.Review of the facility policy and procedure titled Medication Administration with the last review date of 12/2/2025 read, Policy: It is the policy of the facility to ensure that medications that are administered by licensed nurses, or other staff who are legally authorized to do so in this state, as ordered by the physician, and is done in accordance with professional standards of practice, in a manner to prevent contamination or infection.

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