

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 195180	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/10/2025
NAME OF PROVIDER OR SUPPLIER Ochsner Medical Center Skilled Nursing Facility		STREET ADDRESS, CITY, STATE, ZIP CODE 2614 Jefferson Hwy, 3rd Floor Jefferson, LA 70121	

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)
<p>F 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47081</p> <p>Based on observations, interviews, and record reviews, the facility failed to:</p> <ol style="list-style-type: none"> 1. Ensure three expired bags of 5% dextrose solution were not available for resident use in 1 (Medication Room b) of 2 (Medication Room a, Medication Room b) medication rooms observed; and, 2. Ensure an expired sterile intravenous (IV) catheter was not available for resident use in 1 (Workstation on Wheels [WOW] a) of 3 (WOW a, WOW b, WOW c) WOWs observed. <p>Findings:</p> <ol style="list-style-type: none"> 1. <p>Review of the facility's Medication Security and Storage policy and procedure dated [DATE] revealed, in part, medications will be stored in a manner consistent with manufacturer recommendations and applicable federal, state, and local laws.</p> <p>Observation on [DATE] at 9:45AM of Medication Room b revealed:</p> <ul style="list-style-type: none"> - Two 50 milliliter (mL) bags of 5% dextrose injection solution with an expiration date of ,d+[DATE]; and, - One 50 mL bag of 5% dextrose injection solution with an expiration date of ,d+[DATE]. <p>Review of the [NAME] Product Expiration Date Extension document dated [DATE] revealed, in part, the above mentioned 50 mL bags of 5% dextrose injection solution expiration dates were not extended as a result of the intravenous solution shortage.</p> <p>In an interview on [DATE] at 9:50AM, S11Licensed Practical Nurse (LPN) confirmed the above mentioned 50 mL bags of 5% dextrose injection solution located in Medication Room b were expired, and should not have been available for resident use.</p> <p>(continued on next page)</p>

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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<p>F 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>In an interview on [DATE] at 9:55AM, S1Administrator could offer no further explanation as to why the above mentioned 50 mL bags of 5% dextrose injection solution were expired and available for resident use.</p> <p>2.</p> <p>Observation on [DATE] at 10:15AM of WOW a revealed a 24 gauge (G) x ,d+[DATE] inch (in.) Introcan sterile safety IV catheter with an expiration date of [DATE].</p> <p>Review of the Center for Disease Control and Prevention (CDC)'s Guideline for Disinfection and Sterilization in Healthcare facilities dated 2008 and updated in [DATE] revealed, in part, any item that has been sterilized should not be used after the expiration date for that item has been exceeded.</p> <p>In an interview on [DATE] at 10:30AM, S10LPN confirmed the above mentioned IV catheter in WOW a was expired, and available for resident use and should not have been.</p> <p>In an interview on [DATE] at 10:40AM, S2Director of Nursing (DON) confirmed the above mentioned IV catheter was expired and offered no further explanation as to why the IV catheter was in WOW a and available for resident use.</p>

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide and implement an infection prevention and control program.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47081</p> <p>Based on observations, interviews, and record reviews, the facility failed to ensure staff members followed isolation precautions for 3 (S5Registered Nurse [RN], S6Licensed Practical Nurse [LPN], S8Rehabilitation Technician [RT]) of 3 (S5RN, S6LPN, S8RT) staff members observed for adherence to isolation precautions.</p> <p>Findings:</p> <p>Resident #190</p> <p>Review of the facility's Isolation policy and procedure dated 03/08/2021 revealed, in part, airborne, contact, and droplet precautions required all who entered the room to wear gown, gloves, eye protection (face shield or goggles), and an N-95 respirator.</p> <p>Review of Resident #190's medical record revealed Resident #190 was admitted to the facility on [DATE] with a positive Covid-19 test result from the same date.</p> <p>Review of Resident #190's March 2025 physician's orders revealed, in part, an order dated 03/03/2025 for airborne, contact, and droplet isolation precautions.</p> <p>Observation on 03/05/2025 at 12:13PM revealed Resident #190 had an airborne, contact, and droplet precautions sign on his door indicating an N-95 mask, eye protection (face shield or goggles), gown, and gloves should be put on before entering the room. Further observation revealed no eye protection was available for use in the isolation door caddy.</p> <p>Observation on 03/05/2025 at 12:15PM revealed S5RN entered Resident #190's room without eye protection on. Further observation revealed S5RN was in direct contact with Resident #190 while in Resident #190's room.</p> <p>In an interview on 03/05/2025 at 12:58PM, S5RN confirmed Resident #190 was on airborne, contact, and droplet isolation precautions for Covid-19. S5RN further indicated only an N-95 mask, gown, and gloves were required to be worn while inside an airborne, contact, and droplet isolation precautions room.</p> <p>Observation on 03/06/2025 at 9:05AM revealed S6LPN entered Resident #190's room without eye protection on. Further observation revealed S6LPN was in direct contact with Resident #190 while in Resident #190's room.</p> <p>In an interview on 03/07/2025 at 10:37AM, S2Director of Nursing (DON) confirmed Resident #190 was on airborne, contact, and droplet isolation precautions. S2DON further indicated all personnel should have put on eye protection before entering Resident #190's room in accordance with the facility's policy.</p> <p>(continued on next page)</p>

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F 0880 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	<p>In an interview on 03/07/2025 at 11:15AM, S9Infection Control Director confirmed staff members were required to wear eye protection when entering an airborne, contact, and droplet isolation precautions room in accordance with the facility's policy.</p> <p>Resident #182</p> <p>Review of the facility's Isolation policy and procedure dated 03/08/2021 revealed, in part, protective precautions are used for patients that are immunocompromised.</p> <p>Review of Resident #182's March 2025 physician's orders revealed, in part, an order dated 02/19/2025 for continuous enhanced respiratory precautions due to Resident #182's history of cancer.</p> <p>Observation on 03/07/2025 at 10:00AM revealed, Resident #182 had an Enhanced Respiratory Precautions sign on her door indicating a mask should be put on before entering the room.</p> <p>Observation on 03/07/2025 at 10:07AM revealed S8RT was in Resident #182's room, sitting on the sofa next to Resident #182 without a mask on.</p> <p>In an interview on 03/07/2025 at 10:10AM, S8RT confirmed she was sitting in Resident #182's room without a mask on and should not have been.</p> <p>In an interview on 03/07/2025 at 10:37AM, S2DON confirmed Resident #182 was on Enhanced Respiratory Precautions. S2DON further confirmed anyone who entered Resident #182's room should have put a mask on before entering.</p>		