STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	305095	A. Building B. Wing	12/11/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Derry Center for Rehabilitation and Healthcare	20 Chester Road Derry, NH 03038

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 0761 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	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. Based on interview, observation and record review it was determined that the facility failed to follow currently accepted professional principles for labeling and storing medications in 1 of 1 medications cart and in 1 of 1 medication room observed. (Resident identifiers are #1, #21, and #34 .)Findings include: Observation on 12/9/25 at approximately 8:20 a.m. of the facility's medication room revealed one open bottle of Tuberculin Purified Protein Derivative (Mantoux) with an open date of 10/22/25 and to discard after 30 days. Interview on 12/9/25 at approximately 8:25 a.m. with Staff A (Licensed Practical Nurse) confirmed the above findings. Review on 12/9/25 of the manufacturer's instructions for Tuberculin Purified Protein Derivative, dated October 2021, revealed .A vial of Tubersol which has been entered and in use for 30 days should be discarded . Observation on 12/9/25 at approximately 8:45 a.m. of the East Medication Cart revealed one open bottle of Brimodine eye drops with no open date or open expiration date for Resident #21, one Symbicort Inhaler with no open date or open expiration date for Resident #1, one open Breyna inhaler with no open date or open expiration date for Resident #34, and one Symbicort Inhaler with no open date or open expiration date for Resident #34. Interview on 12/9/25 at approximately 9:00 a.m. with Staff B (Registered Nurse) confirmed the above findings. Review on 12/9/25 of the Consumer Medicine Information for Brimodine, Dated May 2017, revealed . Storage . Discard the eye drops 4 weeks after opening . Review on 12/9/25 of the patient instructions for Breyna inhaler, revision date 9/2020, revealed . Throw away Breyna when the counter shows zero ('0) or 3 months after you take your Breyna inhaler out of its foil pouch, whichever comes first . Review on 12/9/25 of the manufacturer's instructions for Symbicort, revised December 2017, revealed . throw away Symbicort when the counter reaches zero (0) or 3 months after you take Symbicort out of its foil pouch, whichever comes first . Review on 12/9/25 of the facility policy titled Administering Medications, revised April 2019, revealed 12. The expiration/beyond use date on the medication label is checked prior to administering. When opening a multi-dose container, the open date is recorded on the container.

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