STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	675949	A. Building B. Wing	04/13/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Avir at Cowhorn Creek	5524 Cowhorn Creek Texarkana, TX 75503

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 0755 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to provide pharmaceutical services including procedures that assure the accurate administering of all drugs and biologicals, to meet the needs of 1 of 1 residents reviewed for pharmacy services. (Resident #1)The facility failed to accurately administer medications for Resident #1 when LVN A administered 15 medications late.This failure could place residents at risk for inaccurate drug administration and worsening of condition. Findings included:Record review of a face sheet dated 04/13/26 indicated Resident #1 was [AGE] years old and was admitted on [DATE] with diagnoses including hemiplegia and hemiparesis following cerebral infarction affecting the left non-dominant side (common, often debilitating, one-sided motor impairments following cerebral infarction (stroke)), atrial fibrillation (a common heart rhythm disorder characterized by rapid, erratic electrical signals causing the upper chambers of the heart to quiver instead of beating effectively), seizures, and high blood pressure.Record review of an Order Summary Report for Resident #1 dated 04/13/26 indicated the following physician's orders:Amlodipine Beslylate (a medication for high blood pressure) 10 mg 1 tablet by mouth 1 time a day for hypertension (high blood pressure) with a start date of 04/07/25.Artificial Tears Ophthalmic (concerning the eyes) Solution, instill 1 drop in both eye two times a day for dry eyes with a start date of 05/13/25.Aspirin 81 mg oral tablet, 1 tablet by mouth one time a day related to hemiplegia and hemiparesis following cerebral infarction affecting the left non-dominant side with a start date of 04/07/25.Carvedilol 6.25 mg, 1 tablet two times a day related to hypertension with a start date of 08/31/25.Eliquis 5 mg, give 1 tablet by mouth two times a day related to hemiplegia and hemiparesis following cerebral infarction affecting the left non-dominant side with a start date of 08/31/25.Keppra (Lefetiraceta) 500 mg, give 1 tablet by mouth two times a day related to seizures with a start date of 08/31/25.Losartan 100 mg, give 1 tablet orally one time a day for heart failure with a start date of 04/07/25.Mucinex Oral Tablet Extended Release12 Hour, 600 mg, give 1 tablet by mouth two times a day related to acute respiratory failure with a start date of 09/02/25.Multivitamin with minerals, give 1 tablet by mouth once a day for vitamin deficiency with a start date of 04/07/25.Myrbetriq 40 mg, give 1 tablet orally once time a day related to urinary incontinence with a start date of 04/07/25.Pantoprazole 40 mg, give 1 tablet orally two times a day related to gastro-esophageal reflux disease (heartburn) with a start date of 08/31/25.Potassium Chloride 10 milliequivalent, give 1 tablet orally two times a day related to hypokalemia (low potassium) with a start date of 08/31/25.Senna Oral Tablet 8.6 mg, give 1 tablet by mouth two times a day related to constipation with a start date of 08/31/25.Vitamin D3 Oral table 25 micrograms, give 1 tablet by mouth one time per day related to a vitamin deficiency with a start date of 04/07/25.Zyrtec Allergy Oral tablet 10 mg, give 1 tablet orally one time a day related to allergies with a start day of 10/11/25.Record review of an annual MDS assessment dated [DATE] indicated Resident #1 had a BIMS score of 12 which indicated moderately impaired cognition. The MDS indicated Resident #1 was dependent on staff for most ADLs.Record review of a care plan last revised on 01/27/26 indicated Resident #1 was at risk for an impaired breathing pattern. There was an intervention to administer medications as ordered. The care plan (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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F 0755 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	indicated Resident #1 had a diagnosis of hypertension and was at risk for decrease cardiac output. There was an intervention to administer medications as ordered. The care plan indicated Resident #1 was at risk for seizures related to a history of seizures. There was an intervention to administer medications as ordered. The care plan indicated Resident #1 was incontinent of bowel and bladder. There was an intervention to administer medications as ordered. The care plan indicated Resident #1 was at risk for bruising and bleeding related to the anti-coagulant Eliquis. There was an intervention to administer the medication as ordered. The care plan indicated Resident #1 had high blood pressure. There was an intervention to give anti-hypertensive medications as ordered.Record review of a MAR dated 04/01/26 - 04/13/26 for Resident #1 indicated LVN A administered medications that were due at 7:00 a.m. on 04/13/26. The MAR did not indicate an administration time. The following medications were administered:Amlodipine Beslylate (a medication for high blood pressure) 10 mg 1 tablet by mouth.Artificial Tears Ophthalmic (concerning the eyes) Solution, 1 drop in both eyes.Aspirin 81 mg oral tablet, 1 tablet by mouth.Carvedilol 6.25 mg, 1 tablet by mouth.Eliquis 5 mg, give 1 tablet by mouth.Keppra (Lefetiraceta) 500 mg, 1 tablet by mouth.Losartan 100 mg,1 tablet orally.Mucinex Oral Tablet Extended Release12 Hour, 600 mg, 1 tablet by mouth.Multivitamin with minerals, 1 tablet by mouth.Myrbetriq 40 mg, 1 tablet by mouth.Pantoprazole 40 mg, 1 tablet orally.Potassium Chloride 10 milliequivalent, 1 tablet orally.Senna Oral Tablet 8.6 mg, 1 tablet by mouth.Vitamin D3 Oral table 25 micrograms,1 tablet by mouth.Zyrtec Allergy Oral tablet 10 mg,1 tablet orally.During an observation and interview on 04/13/26 at 8:54 a.m., LVN A said she worked on an as needed basis for the facility. She said she did the best she could when passing medications to residents. She said the only time she was late passing medications was because she worked on an as needed basis and it took her awhile to find things. LVN A prepared and administered the following medications:Amlodipine Beslylate (a medication for high blood pressure) 10 mg 1 tablet by mouth.Artificial Tears Ophthalmic (concerning the eyes) Solution, 1 drop in both eyes.Aspirin 81 mg oral tablet, 1 tablet by mouth.Carvedilol 6.25 mg, 1 tablet by mouth.Eliquis 5 mg, give 1 tablet by mouth.Keppra (Lefetiraceta) 500 mg, 1 tablet by mouth.Losartan 100 mg,1 tablet orally.Mucinex Oral Tablet Extended Release12 Hour, 600 mg, 1 tablet by mouth.Multivitamin with minerals, 1 tablet by mouth.Myrbetriq 40 mg, 1 tablet by mouth.Pantoprazole 40 mg, 1 tablet orally.Potassium Chloride 10 milliequivalent, 1 tablet orally.Senna Oral Tablet 8.6 mg, 1 tablet by mouth.Vitamin D3 Oral table 25 micrograms,1 tablet by mouth.Zyrtec Allergy Oral tablet 10 mg,1 tablet orally.During an interview on 04/13/26 at 1:42 p.m., LVN A said the morning medications for Resident #1 were late the morning of 04/13/26. She said even with the hour window they are given for medication administration, the medication were still late. She said the medications were due at 7:00 a.m. She said they were late because she was not familiar with the medication cart and she was slower.During an interview on 04/13/26 at 2:19 p.m., RN B said she had not known medications to be passed late. She said it was important for medications to be passed on time, so the residents get the medications they need. She said some residents get the same medications several times a day and you did not want to give them too early or too late. She said you had an hour before the ordered time and an hour after the ordered time to pass the medication.During an interview on 04/13/26 at 2:36 p.m., the DON said she expected for residents to have received their medications on time. She said they normally had a medication aide and LVN A did not normally pass medications. She said it was important for staff to follow the doctor's orders. She said she did not know medications were being passed late.During an interview on 04/13/26 at 3:07 p.m., the Administrator said she expected for medications to be passed timely and as ordered. She said it was important for residents to get their medications on time, it was important to follow the physician's order and how it affected the resident depended on the medication.During an interview on 04/13/26 at 3:38 p.m., the ADON said she expected medications to have been given on time. She said they did have an hour before and an hour after the ordered time. She said it was important to be given on time because that was how the doctor ordered the medication and they had to follow doctor's orders.Record review of an Administering Medications facility policy last revised on (continued on next page)

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F 0755 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	04/2019 indicated, .Medications are administered in a safe and timely manner, and as prescribed.Medications are administered in accordance with prescriber orders, including any required time frames.Medication administration times are determined by resident need and benefit, not staff convenience. Factors that are considered include.enhancing optimal therapeutic effect of the medication.preventing potential medication or food interactions.Medications are administered within one (1) hour of their prescribed time.As required or indicated for a medication, the individual administering the medication records in the resident's medical record.the date and time the medication was administered.