Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	55C0001059	05/07/2026
Name of Provider or Supplier	**Street Address, City, State**	
Fort Sutter Surgery Center, A Ca Limited Partnership	2801 K Street, Suite 525, Sacramento, CA	

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

(X4) ID Prefix Tag	**Summary Statement of Deficiencies** (Each deficiency should be preceded by full regulatory or LSC identifying information)
Q0064	STANDARD LEVEL TAG FOR SURGICAL SERVICES CFR(s): 416.42 Surgical procedures must be performed in a safe manner by qualified physicians who have been granted clinical privileges by the governing body of the ASC in accordance with approved policies and procedures of the ASC. This STANDARD is not met as evidenced by: Based on observation, interview, and record review, the Ambulatory Surgery Center (ASC) failed to ensure surgical procedures were performed in a safe manner for all surgical patients when: 1. Expired items were found in the supply areas available for patient use during surgical procedures, and 2. An anesthesiologist (ANES 2) provided anesthesia services for nine patients at the ASC and did not have clinical privileges (specific types of procedures a physician is allowed to perform) granted by the governing body at the time these services were provided. These failures posed safety hazards for patients undergoing procedures and had the potential to compromise optimal patient outcomes. Findings: 1. During an observation on 5/5/26 at 3:05 p.m. in the Sterile Supply Rooms (a room specifically meant to store sterile supplies in a way that protects them from

contamination, moisture, and damage) the following four types of sterile (free from living microorganisms like bacteria, fungi, viruses, and spores) supplies were found:

a. two packages containing ultrasound transmission gel (applied to the skin during ultrasound exams to eliminate air pockets between the transducer and the body to ensure high-frequency sound waves travel directly to tissues, allowing for clear imaging) with an expiration date of 12/25,

b. three packages containing [product name] (a product used to stop bleeding during surgery) with an expiration date of 4/26,

c. eight packages containing penrose drains (a soft, flexible, latex tube used in surgery to prevent infection by allowing blood, pus, or other fluids to passively drain away from a wound) with an expiration date of 9/28/25, and

d. one package containing [product name] or U- Drape (a medical sheet that creates a sterile barrier between a patients wound or surgical site and the surrounding environment to prevent infection and contamination during a procedure) with an expiration date of 10/25.

During a concurrent interview and observation on 5/5/26 at 3:30 p.m. with the Sterile Processing Technician (SPT) in the Sterile Supply Room, the SPT stated the four types of sterile items observed as noted above were expired.

During an interview on 5/6/26 at 9:43 a.m. with the Operating Room Manger (ORM), the ORM stated using these expired supplies in the Operating Room could cause an infection for the patient.

During a review of the facilitys policy and procedure (P&P) titled, Medical Supply Expiration Audit Process Policy, dated 3/31/25, the P&P indicated, Adhering to the Expiration Date is essential to preserve quality and avoid potential risks associated with expired items... Identify items with less than thirty (30) days and coordinate with clinical staff to remove them

2. During a concurrent interview and document review on 5/5/26 at 10:30 a.m. with the Administrator (ADM), the [name of ASC] PSR LOG 2026 was reviewed. The log had eight entries dated 1/14/26 with the type of event noted as Error in Providing Privaliges (sic). The ADM stated the anesthesiologist (ANES 2) listed for those eight cases did not have clinical privileges at the facility at the time these procedures were performed. The ADM went on to state ANES 2 should not have provided patient care without clinical privileges. A review of the OR Master Daily Schedule, dated 1/14/26, indicated ANES 2 provided care for nine patients on this date. The ADM confirmed ANES 2 provided care to nine patients on 1/14/26 without the required clinical privileges.

During a concurrent interview and document review on 5/5/26 with the Medical Staff Manager (MSM manages the verification, appointment, and reappointment of physicians), ANES 2s credential file (CF-a centralized file to include the physicians education, licensure, and approved clinical privileges) was reviewed. ANES 2s CF indicated, Retired as of 8/1/25. MEC/GB (medical executive committee/governing body) approved to make inactive as of 8/1/25. MSM confirmed ANES 2 was made inactive as of 8/1/25.

	During a review of the [Name of ASC] Medical Executive Committee 3rd Quarter 2025 Meeting Minutes [MECMM], dated 10/14/25, the MECMM indicated, Medical Staff CredentialingResignations/Retirements/Automatic Term [termination] from Medical Staff [ANES 2]. During a review of the [Name of ASC] Governing Body Minutes [GBM], dated 10/14 /25, the GBM indicated, Upon recommendation of the MEC the Governing Board made a motion to: ApproveMedical Staff Credentialing Recommendations.... During a review of the Medical Staff Bylaws of [name of ASC], undated, the Medical Staff Bylaws indicated, Clinical Privilegesa Medical Staff member who practices Clinical Privileges at the facility shall be entitled to exercise only those Clinical Privileges specifically granted. During a review of the Governing Body Bylaws [GBB]," dated 12/20/17, the GBB indicated, The Governing Body shall have the following goals and objectives: Appointing members to the Medical StaffRequiring the Medical Staff to abide by the rules, regulations and bylaws of the Facility.