Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number** 55C0001061	**(X3) Date Survey Completed** 07/28/2025
Name of Provider or Supplier Pacific Eye Institute	**Street Address, City, State** 555 N 13th Avenue, Upland, 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)
K0355	Portable Fire Extinguishers CFR(s): NFPA 101 Portable Fire Extinguishers Portable fire extinguishers are selected, installed, inspected, and maintained in accordance with NFPA 10, Standard for Portable Fire Extinguishers. 20.3.5.3, 21.3.5.3, 9.7.4.1, NFPA 10 This STANDARD is not met as evidenced by: Based on observation, record review, and interview, the facility failed to maintain the portable fire extinguishers. This was evidenced by missing an annual inspection, missing monthly visual inspections, and by missing a tamper seal on the top handle. This could result in a malfunction of the extinguisher to operate at the time of a fire. This affected two of two patients, staff members, and visitors in two of two smoke compartments. NFPA 101, Life Safety Code, 2012 Edition 21.3.5.3 Portable fire extinguishers shall be provided in ambulatory health care facilities in accordance with 9.7.4.1. 9.7.4.1* Where required by the provisions of another section of this Code, portable fire extinguishers shall be selected, installed, inspected, and maintained in accordance with NFPA 10, Standard for Portable Fire Extinguishers. NFPA 10, Standard for Portable Fire Extinguishers, 2010 Edition

7.2 Inspection.

7.2.1.2* Fire extinguishers shall be inspected either manually or by means of an electronic monitoring device / system at a minimum of 30-day intervals.

7.2.2 Procedures. Periodic inspection or electronic monitoring of fire extinguishers shall include a check of at least the following items:

(1) Location in designated place

(2) No obstruction to access or visibility

(3) Pressure gauge reading or indicator in the operable range or position

(4) Fullness determined by weight or hefting for self-expelling-type extinguishers, cartridge-operated extinguishers, and pump tanks

7.2.2.2 Where required by 7.2.2., the following inspection procedure shall be in addition to those addressed in 7.2.2:

1. Verifying that operating instructions on nameplates are legible and face outward.

2. Checking for broken or missing safety seals and tamper indicators.

3. Examination for obvious physical damage, corrosion, leakage, or clogged nozzle.

7.2.3 Corrective Action. When an inspection of any fire extinguisher reveals a deficiency in any of the conditions listed in 7.2.2, immediate corrective action shall be taken.

7.2.4.3 Where a least monthly manual inspections are conducted, the date the manual inspection was performed and the initials of the person performing the inspections shall be recorded.

7.3* Maintenance.

7.3.1 Frequency.

7.3.1.1 All Fire Extinguisher

7.3.1.1.1 Fire extinguishers shall be subject to maintenance at intervals of not more than 1 year, at the time of hydrostatic test, or when specifically indicated by an inspection or electronic notification.

7.3.1.1.2 Fire extinguishers shall be internally examined at intervals not exceeding those specified in Table 7.3.1.1.2.

Table 7.3.1.1.2

-Dry Chemical, cartridge-and cylinder-operated, with mild steel shells: 1 year interval

	Findings: During a tour of the facility, record review, and interview with the Office Manager 2, Office Manager 3, and Facilities Manager on 7/28/25, the portable fire extinguishers were observed, and records were requested and reviewed. 1. At 2:50 p.m., the fire extinguisher in the southwest stairwell was observed. The inspection tag indicated that it was last serviced annually in March 2022. During an interview, the Facilities Manager stated that the vendor should have serviced it annually during November 2024. 2. At 2:59 p.m., the fire extinguisher in the pre-operation area was observed. The pull pin tamper seal was missing. During an interview, the Office Manager 2 stated that she was not aware of it. 3. At 3:17 p.m., the fire extinguishers in the pre-operation, nurse station, and lobby were missing the monthly inspection in December 2024. During an interview, the Facilities Manager stated that the All-In-One Facilities Management (AFM) completes monthly inspections on Thursdays.