



C.L. "BUTCH" OTTER – Governor
RICHARD M. ARMSTRONG – Director

IDAHO DEPARTMENT OF
HEALTH & WELFARE

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October 6, 2011

Michele Magnuson, Administrator
North Idaho Pain Center
2003 Lincoln Way Suite 310
Coeur d'Alene, Idaho 83814

RE: North Idaho Pain Center, Provider #13C0001058

Dear Ms. Magnuson:

This is to advise you of the findings of the Medicare Fire Life Safety Survey conducted at North Idaho Pain Center on September 29, 2011.

Based on the results of this survey, North Idaho Pain Center was found to be in substantial compliance with the fire/life safety requirements set forth in the Life Safety Code, 2000 Edition, for Ambulatory Surgery Centers.

Thank you for the courtesies extended to us during our visit. If we can be of help to you, please call our office at (208)334-6626.

Sincerely,

MARK P. GRIMES
Supervisor
Facility Fire Safety and Construction Program

MPG/lj

Enclosures

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Printed: 10/05/2011
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 13C0001058	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - ENTIRE THIRD FLOOR OF I B. WING _____	(X3) DATE SURVEY COMPLETED 09/29/2011
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NAME OF PROVIDER OR SUPPLIER NORTH IDAHO PAIN CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 2003 LINCOLN WAY STE 310 COEUR D'ALENE, ID 83814
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
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K 000	<p>INITIAL COMMENTS</p> <p>The Ambulatory Surgery Center (ASC) is located on the third floor of a three (3) story hospital building of Type I fire resistive construction. The third floor is separated from the second floor by a two (2) hour rated floor/ceiling assembly. Occupancy of the floor is limited to the ASC; two (2) physician office practices; mechanical spaces; and, some meeting rooms. The building is fully sprinklered and has a complete fire alarm system with system smoke detection throughout, including the ASC. The ASC is approximately 2,500 square feet and is separated from the exit access corridor and adjoining clinic by a one (1) hour rated wall assembly. Two (2) remotely located two (2) hour stair towers serve the floor. Procedures in the ASC are limited to non-general anesthesia and emergency lighting and power in the Ambulatory Surgery Center is provided by the hospital's Essential Electrical System.</p> <p>The fire/life safety survey was conducted by:</p> <p>Eric Mundell REHS Health Facility Surveyor Facility Fire/Life Safety & Construction Program</p> <p>The Ambulatory Surgery Center was found to be in substantial compliance with applicable fire/life safety requirements (i.e., 2000 Edition of the Life Safety Code, Chapter 20, New Ambulatory Health Occupancy) set forth under 42 CFR 416.44.</p>	K 000		
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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.