



**STATE OF FLORIDA
DEPARTMENT OF HEALTH
INVESTIGATIVE SERVICES
Office Surgery Center**



File # 420
Insp # 1390

NAME SoMa Surgery Center DBA Jolie Plastic Surgery	PERMIT NUMBER 350	DATE OF INSPECTION 02/04/2019	
DOING BUSINESS AS			
STREET ADDRESS 8506 SW 8TH STREET		TELEPHONE # (305) 262-6070	EXT
CITY MIAMI	COUNTY MIAMI-DADE	STATE/ZIP FL/33144	

License Relations

Office Surgery Registration

ABOU-SAYED, HATEM AHMED	License # 88445
ABU-DEIAB, MOHAMMED FOUAD	License # 9467881
ABU-DEIAB, MOHAMMED FOUAD	License # 9467881
AUGUSTIN, PIERRE ANDRE	License # 3253772
AUGUSTIN, PIERRE ANDRE	License # 3253772
BREWSTER, EARL MARK JR	License # 126781
CRUZ, CARLOS ALBERTO M D	License # 91715
DEL BUSTO, JOHANNA	License # 9187080
DEL BUSTO, JOHANNA	License # 9187080
DEL RISCO, JESUS LAZARO	License # 2512552
DEREFAKA, GEORGE T	License # 9274231
DEREFAKA, GEORGE T	License # 9274231
FERRAND, LISA MARIE	License # 9209708
FERRAND, LISA MARIE	License # 9209708
FISHER, JONATHAN GEORGE R S	License # 96746
GARCIA, ELIZABETH	License # 9233902
GARCIA, ELIZABETH	License # 9233902
GHURANI, GISELLE BARREAU	License # 84775
GHURANI, RAMI KAMAL MD	License # 89865
JARIAL, RAVINDER SINGH	License # 9321
KAGAN, ROBERT SCOTT	License # 98957
KING, JAMES MICHAEL	License # 9357043
KING, JAMES MICHAEL	License # 9357043
KNAPICH, JOSEPH	License # 9307886
KNAPICH, JOSEPH	License # 9307886
LUNA, DIEGO FRANCISCO	License # 9235700
LUNA, DIEGO FRANCISCO	License # 9235700
MEHIO, GHASSAN	License # 135202
MESA BATISTA, AMNIEL	License # 9329514
MESA BATISTA, AMNIEL	License # 9329514
PANE, THOMAS ANGELO	License # 94792
PASCUAL, AMARYLLIS	License # 94686
PASTORA, BEVERLY	License # 9234018
PASTORA, BEVERLY	License # 9234018
PEREZ SERRANO, LUIS ENRIQUE	License # 9462050
REYES-SERRANO, MARIO E	License # 94353
RODRIGUEZ FERNANDEZ, CLAUDIA	License # 9484294

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ROIG, ANTHONY LAZARO	License # 9296141
ROIG, ANTHONY LAZARO	License # 9296141
ROSENTHAL, ANDREW HAL	License # 89367
RUIZ, JOBINA SUSANNAH	License # 9432765
RUIZ, JOBINA SUSANNAH	License # 9432765
SALAS, RAFAEL EMERICK MD	License # 108242
SANCHEZ, NESTOR JOSE	License # 3304162
SANCHEZ, NESTOR JOSE	License # 3304162
VALLADARES, ERIC RAUL	License # 91049
VALLS, ARNALDO	License # 82727

Office Surgery Registration

Requirement for Physician Office Registration

1. The physician(s) is registered to perform office-based surgery with the Board of Medicine [64B8-9.0091(1), FAC] <i>Abou-Sayed, Hatem Brewster, Earl Fisher, Jonathan Ghurani, Rami Jarial, Ravinder Kagan, Robert Pane, Thomas Pascual, Amaryllis Reyes-Serrano, Mario Valladares, Eric Valls, Arnaldo</i>	Yes
2. The physician(s) office is not accredited with a national accrediting organization or Board approved organization	Yes
3. The physician(s) performs surgery as defined in the Board Rule [64B8-9.009(1)(a), FAC]	Yes
4. The surgeon(s) is an active licensed physician(s) in the State of Florida[64B8- 9.009(1)(b), FAC] <i>Abou-Sayed, Hatem ME 88445 expires 1/31/2020 Brewster, Earl ME 126781 expires 1/31/2020 Fisher, Jonathan ME 96746 expires 1/31/2021 Ghurani, Rami ME 89865 expires 1/31/2020 Jarial, Ravinder OS 9321 expires 3/31/2020 Kagan, Robert ME 98957 expires 1/31/2021 Pane, Thomas ME 94792 expires 1/31/2020 Pascual, Amaryllis ME 94686 expires 1/31/2020 Reyes-Serrano, Mario ME 94353 expires 1/31/2020 Valladares, Eric ME 91049 expires 1/31/2020 Valls, Arnaldo ME 82727 expires 1/31/2021</i>	Yes
5. The physician(s) notified the Department, in writing of any changes to the registration information. [64B8- 9.0091(1)(c), FAC]	Yes
6. The registration is posted in the office [64B8- 9.0091(1)(d), FAC]	Yes
7. The equipment meets the current performance standards[64B8-9.009(1)(c), FAC] <i>Biomedical inspection sticker not on medication refrigerator. To be addressed on corrective action plan.</i> <i>Overhead light in OR 2 not turning light on. Corrected onsite during time of inspection. Does not need to be addressed on corrective action plan</i>	No
8. The surgery is being performed outside a hospital, ambulatory surgical center, abortion clinic or other medical facility licensed by the Department of Health or the Agency for Health Care Administration[64B8-9.009(1)(d), FAC]	Yes
8a. The surgery is being performed pursuant to definition of office surgery as described in 64b8-9.009(1)(d), FAC.	Yes

General Requirements for Office Surgery

9. Compliance with pre-operative Evaluation[64B8-9.009(2)(a) FAC]	Yes
9a. The surgeon(s) examined the patient immediately before the surgery to evaluate the risk of anesthesia and of the surgical procedure to be performed	Yes
9b. The surgeon(s) delegated the preoperative heart lung evaluation to a qualified anesthesia provider within the scope of the provider's practice and, if applicable, protocol.	Yes
10. Compliance with Patient/Procedures Records[64B8-9.009(2)(a) FAC]	Yes
11. Compliance with Informed Consent[64B8-9.009(2)(a), FAC]	Yes
12. Surgical Logs contain confidential patient identifier, time of arrival in the operating suite, documentation of completion of the medical clearance as performed by the anesthesiologist or the operating physician, the surgeon's name, diagnosis, CPT Codes, patient ASA classification, the type of procedure, the level of surgery, the anesthesia provider, the type of anesthesia used, the duration of the procedure, and any adverse incidents [64B8-9.009(2)(c), FAC]	Yes
12a. The surgeon(s) completed Level II, Level III or Liposuction over 1,000cc procedures	Yes
12b. Surgical Logs are maintained for six years after last patient contact	Yes
13. Compliance with liposuction procedures[64B8-9.009(2)(d), FAC]	Yes
13a. The surgeon(s) removed no more than 4,000 cc of fat	Yes
13b. The surgeon(s) injected no more than 50mg/kg of Lidocaine for tumescent liposuction	Yes
14. Compliance with Elective Cosmetic and Plastic Surgery Procedures[64B8- 9.009(2)(f), FAC]	Yes

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14a. Surgery was completed in under 8 hrs.	Yes
14b. Patients were discharged within 24 hrs.	Yes
14c. If Patients time in office exceed 23 hrs. 59 minutes patient was transferred to a hospital.	Yes
15. Compliance with overnight stays except for elective cosmetic and plastic surgery[64B8-9.009(2)(f), FAC]	N/A
15a. Only elective cosmetic and plastic surgery patients stayed past midnight	N/A
15b. Overnight stays were limited to the physician' office	N/A
16. Compliance with overnight stays in relation to any surgical procedure[64B8-9.009(2)(h), FAC]	N/A
16a. Two monitors were present (one monitor was ACLS certified)	N/A
16b. Monitor to patient ratio was kept at 1 monitor to 2 patients	Yes
16c. Once physician signed a timed and dated discharge order, single monitoring began by a ACLS certified monitor	N/A
16d. The surgeon(s) was reachable by telephone and available to return to the office within 15 minutes	Yes
17. Compliance with post-operative care[64B8-9.009(2)(h), FAC]	Yes
18. Compliance with risk management program[64B8-9.009(2)(j), FAC]	Yes
18a. Risk Management program includes the identification, investigation, and analysis of the frequency and causes of adverse incidents to patients	Yes
18b. Risk Management program includes the identification of trends or patterns of incidents	Yes
18c. Risk Management program includes the development of appropriate measures to correct, reduce, minimize, or eliminate the risk of adverse incidents to patients	Yes
18d. Risk Management program includes the documentation of these functions and periodic review no less than quarterly of such information by the surgeon <i>Documentation of meetings dated: 6/12/18, 9/12/18, 11/6/18</i>	Yes
19. Compliance with adverse incident reporting[64B8-9.009(2)(k), FAC] [64B8-9.001, FAC] [458.351 (4), FS] <i>Adverse incident chart # 218997 occurrence date 1/15/19</i>	Yes

Requirements for Level I (Liposuction) Office Surgery

20. Compliance with Training Requirements[64B8-9.009(3)(b)1, FAC]	
21. Compliance with Equipment and Supplies Required[64B8-9.009(3)(b)2, FAC]	
21a. Office has Intravenous access supplies, oxygen, oral airways, and a positive pressure ventilation device	
21b. Office stores the following medications at manufacturer's recommendation: Atropine 3 mg; Diphenhydramine 50 mg; Epinephrine 1 mg in 10 ml; Epinephrine 1 mg in 1 ml vial, 3 vials total; and Hydrocortisone 100 mg	

Requirements for Level II Office Surgery

22. The surgeon(s) have Transfer Agreements or Hospital Staff Privileges for a licensed hospital within reasonable proximity (30 mins.) [64B8-9.009(4)(b)1 FAC] <i>Pascual, Amaryllis staff privileges with Larkin Community Hospital expired 11/7/2017. Per documentation provided 1/30/2019 Dr Pascual is "...performing Level I surgical procedures at this time..." Fisher, Jonathan letter from Larkin Community Hospital dated 12/13/18 states "...approved for provisional privileges for a period of one year beginning the date on this letter..." Brewster, Earl staff privileges with Larkin Community Hospital through 11/5/2019 Abou-Sayed, Hatem staff privileges with North Shore Medical Center through 10/2/2020 Ghurani, Rami staff privileges with Mercy Hospital through 2/26/2020 Jarial, Ravinder staff privileges with Northshore Medical Center through 3/4/2020 Kagan, Robert staff privileges with Larkin Community Hospital through 3/19/2019 Pane, Thomas staff privileges with Larkin Community Hospital through 7/16/2019 Reyes-Serrano, Mario staff privileges with Larkin Community Hospital through 11/6/2019 Valladares, Eric staff privileges with Coral Gables Hospital through 6/14/2020 Valls, Arnaldo staff privileges with Larkin Community Hospital through 8/7/2019</i>	Yes
23. Compliance with Training Requirements[64B8-9.009(4)(b)2, FAC] <i>Brewster, Earl staff privileges with Larkin Community Hospital through 11/5/2019 Abou-Sayed, Hatem staff privileges with North Shore Medical Center through 10/2/2020 Fisher, Jonathan American Board of Plastic Surgery through 12/31/2019 Ghurani, Rami American Board of Plastic Surgery through 12/31/2019 Jarial, Ravinder staff privileges with Northshore Medical Center through 3/4/2020, American Osteopathic Board of Surgery through 9/30/2024 Kagan, Robert staff privileges with Larkin Community Hospital through 3/19/2019, American Board of Plastic Surgery issued 11/7/1992, American Board of Surgery through 7/1/2009 Pane, Thomas staff privileges with Larkin Community Hospital through 7/16/2019, American Board of Surgery through 7/4/2023 Reyes-Serrano, Mario staff privileges with Larkin Community Hospital through 11/6/2019 Valladares, Eric staff privileges with Coral Gables Hospital through 6/14/2020 Valls, Arnaldo staff privileges with Larkin Community Hospital through 8/7/2019 Pascual, Amaryllis per documentation provided 1/30/2019 Dr Pascual is "...performing Level I surgical procedures at this time..."</i>	Yes
24. At least one assistant is certified with Basic Life Support Certification[64B8-9.009(4)(b)2, FAC]	Yes
25. The surgeon(s) are currently certified with Advanced Cardiac Life Support Certification[64B8-9.009(4)(b)2, FAC] <i>Abou-Sayed, Hatem ACLS expires 12/2020 Brewster, Earl ACLS expires 6/2019 Fisher, Jonathan ACLS expires 12/2019 Ghurani, Rami ACLS expires 4/2019 Jarial, Ravinder ACLS expires 3/2019 Kagan, Robert ACLS expires 6/2019 Pane, Thomas ACLS expires 1/2019 Pascual, Amaryllis ACLS expires 2/2020 Reyes-Serrano, Mario ACLS expires 8/2019 Valladares, Eric ACLS expires 6/2020 Valls, Arnaldo ACLS expires 12/2020</i>	Yes

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26. The office has the following equipment/supplies: a Benzodiazepine must be present in the office.; Positive pressure ventilation device (e.g. Ambu) plus oxygen supply; End tidal CO2 detection device; Monitors for blood pressure/EKG/Oxygen saturation; Emergency intubation equipment, which shall at a minimum include suction devices, endotracheal tubes, laryngoscopes, oropharyngeal airways, nasopharyngeal airways and bag valve mask apparatus that are patient-size specific; Defibrillator with defibrillator pads or defibrillator gel, or an Automated External Defibrillator unit (AED); Sufficient back up power is required to allow the physician to safely terminate the procedure and to allow the patient to emerge from the anesthetic, all without compromising the sterility of the procedure or the environment of care; Sterilization equipment and IV solution and IV equipment. [64B8-9.009(4)(b)3, FAC]	Yes
27. Crash cart contains: Adenosine 18 mg; Albuterol 2.5 mg with small volume nebulizer; Amiodarone 300 mg; Atropine 3 mg; Calcium chloride 1 gram; Dextrose 50%; 50 ml; Diphenhydramine 50 mg; Dopamine 200 mg minimum; Epinephrine 1 mg in 10 ml; Epinephrine 1 mg in 1 ml vial, 3 vials total; Flumazenil 1 mg; Furosemide 40 mg; Hydrocortisone 100 mg; Lidocaine appropriate for cardiac administration 100 mg; Magnesium sulfate 2 grams; Naloxone 1.2 mg; A beta blocker class drug; Sodium bicarbonate 50 mg/50 ml; Paralytic agent that is appropriate for use in rapid sequence intubation; A calcium channel blocker class drug; and, Intralipid 20% 500 ml solution (only if non-neuraxial regional blocks are performed). [64B8-9.009(4)(b)3a, FAC]	Yes
28. Compliance with Anesthesia Provider[64B8-9.009(4)(b)4, FAC]	Yes
29. Compliance with Additional Assistance[64B8-9.009(4)(b)4, FAC]	Yes

Requirements for Level III (Include the requirement for level II Office surgery as well as the requirements outlined)

30. Compliance with the American Society of Anesthesiologist's Classifications for appropriate candidates for level III office surgery[64B8-9.009(6)(a)2, FAC]	Yes
31. Complies with Additional Training Requirements[64B8-9.009(6)(b)1,FAC]	Yes
32. Emergency policies and procedures are periodically reviewed, updated, and posted in a conspicuous location. [64B8-9.009(6)(b)2, FAC]	Yes
32a. Emergency policies and procedures cover the following: a. Airway Blockage (foreign body obstruction); b. Allergic Reactions; c. Bradycardia; d. Bronchospasm; e. Cardiac Arrest; f. Chest Pain; g. Hypoglycemia; h. Hypotension; i. Hypoventilation; j. Laryngospasm; k. Local Anesthetic Toxicity Reaction; and, l. Malignant Hyperthermia. <i>Documentation of meetings dated 1/7/19, 1/15/19 topics covered thus far Airway obstruction, cardiac arrest, Malignant hyperthermia, allergic reactions, bronchospasm, and chest pain.</i>	Yes
33. Office has the following equipment/supplies: at least 720 mg of dantrolene on site (if halogenated anesthetics or succinylcholine are utilized); must be comparable to a free standing ambulatory surgical center, including, but not limited to, recovery capability, and must have provisions for proper recordkeeping; Blood pressure monitoring equipment; EKG; end tidal CO2 monitor; pulse oximeter, emergency intubation equipment and a temperature monitoring device; and Table capable of trendelenburg and other positions necessary to facilitate the surgical procedure [64B8-9.009(6)(b)3, FAC]	Yes
34. Complies with Anesthesia Provider[64B8-9.009(6)(b)4, FAC]	Yes
35. Complies with Additional Assistance of Other Personnel Required[64B8-9.009(6)(b)4, FAC]	Yes

Corrective Action Plan

36. Pursuant to 64B8-9.0091(2)(e), a corrective action plan is required to be submitted within 30 days for the noncompliant items listed above.	
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Remarks:

This is an updated inspection report from documentation provided dated 1/30/2019.

I have read and have had this inspection report and the laws and regulations concerned herein explained, and do affirm that the information given herein is true and correct to the best of my knowledge. I have received a copy of the Licensee Bill of Rights.

Inspector Signature:

TAYLOR, NICOLE



Date:2/4/2019

Representative:

Claudia Puentes



Date:2/4/2019