



# Life Safety Code Survey Deficiencies and Compliance Strategies

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# Learning Objectives

- Identify common Life Safety Code (LSC) deficiencies and their impact on compliance.
- Apply risk assessment methods to mitigate potential hazards.
- Evaluate the role of inspection, testing, and maintenance (ITM) in sustaining safety and compliance.
- Develop proactive strategies to reduce risk and enhance regulatory readiness.



# *“Why do ASCs have to follow the Life Safety Code (LSC)?”*

## **Medicare Requirement**

All CMS-certified ASCs must comply with NFPA 101 (2012) and NFPA 99 (2012) under CMS Conditions for Coverage (42 CFR §416.44(b) Appendix L).

*CMS formally adopted the 2012 editions in 2016; surveyors cite directly from these codes.*

## **State Variations**

Some states have adopted newer editions of the LSC; ASCs must meet both CMS and state rules, whichever is stricter.

## **FGI Guidelines**

Many states also enforce the FGI Guidelines for Design & Construction. FGI cites NFPA 101 for fire safety and integrates it into facility design and licensure requirements.



# Did you know?

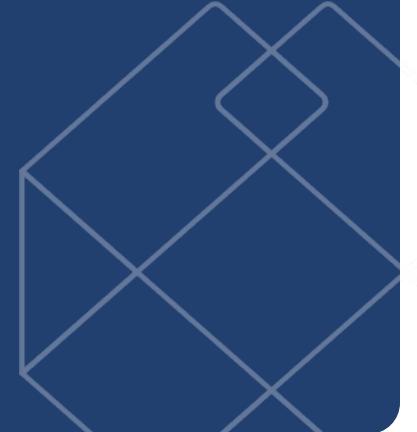
The NFPA Life Safety Code (NFPA 101) is the only **building code written with the sole purpose of protecting human life** rather than property.

While most codes focus on saving structures, **the LSC is all about getting patients, staff, and visitors out safely during a fire or emergency**. That's why it's so detailed about exits, fire doors, alarms, sprinklers, and even the lighting in hallways.



# Common LSC Deficiencies

*“From your expert perspective,  
what would you identify as the TOP 10  
areas of LSC deficiency most commonly  
seen in ASCs?”*



# Top 10 LSC Deficiency Areas

1	Egress / Exits
2	Emergency Lighting / Exit Signs
3	Fire Protection Systems
4	Electrical Safety / Power Systems
5	Fire Barriers / Smoke Compartmentation
6	Storage / Sprinkler Clearance
7	Life Safety Documentation / Testing
8	Compressed Gas / Mechanical Rooms
9	Fire Doors / Smoke Doors
10	Fire Drills / Staff Training

*“That’s quite a list! Can you help us break it down?”*



# Egress / Exits

Corridors kept clear, minimum width maintained	<i>NFPA 101: 7.1.10.1, 7.1.10.2</i>
Exit doors swing direction, signage, accessibility	<i>7.2.1.4, 7.10.1.2</i>
Posted exit route maps (when required)	<i>7.10.8.1</i>

1

Top 10 LSC Deficiency Areas



# Emergency Lighting / Exit Signs

Emergency lighting test for 90 minutes	7.9.2.1, 7.9.2.3
Monthly 30-sec test of task lighting	6.3.2.2.11
Exit signs illuminated & reliable	7.10.5.1, 7.10.6.3
Illumination levels (1 foot-candle at floor)	7.8.1.3, 7.9.2.1

2

Top 10 LSC Deficiency Areas



# Fire Protection Systems

Maintain fire protection features	<i>NFPA 101 (2012), 4.6.12.1</i>
Sprinkler inspection/testing/maintenance	<i>NFPA 25; NFPA 101: 9.7.5</i>
Spare sprinkler head storage ≤100°F	<i>NFPA 25 (2011), 5.4.1.5.5</i>
Fire alarm systems functional and tested	9.6.1.3, 9.6.1.6
Approved fire watch policy	9.6.1.6
Pull stations accessible, unobstructed	9.6.1.5
Fire Department Connection (FDC)	9.7.5
Quarterly Inspections: requires inspection/testing of water-based fire protection systems to ensure it is visible, accessible, and in good condition.	
Waterflow alarm devices	9.7.5
Must be tested semiannually (every 6 months) to ensure they activate within 90 seconds of flow.	

Top 10 LSC Deficiency Areas



# Electrical Safety / Power Systems

No extension cords or daisy-chaining	<i>NFPA 70 (NEC) 400.8; NFPA 101: 9.1.2</i>
Generator testing and records	<i>NFPA 110, Ch. 8; NFPA 101: 9.1.3</i>  8.4.1  Weekly visual inspections Weekly generator log voltage reading Monthly Load Tests: requires monthly testing under load for at least 30 minutes, with documentation Annual fuel quality testing
Electrical panel clearance	<i>NFPA 25 (2011), 5.4.1.5.5</i>
Electrical panel labeling	<i>9.6.1.3, 9.6.1.6</i>  9.6.1.6



## Top 10 LSC Deficiency Areas



# Fire Barriers / Smoke Compartmentation

Fire barriers maintained (no unsealed penetrations)	8.3.5.1, 8.5.6.5
Smoke partitions intact, continuous	8.5.2, 8.5.6
Doors in smoke barriers self-closing/latching	8.5.4.2, 8.5.4.3

5

Top 10 LSC Deficiency Areas



# Storage / Sprinkler Clearance

Clearance below sprinklers ( $\geq 18$ inches)	<i>NFPA 13: 8.5.6.1</i>
No storage in mechanical/electrical rooms	<i>NFPA 101: 7.1.10.1 (egress/utility)</i>
Flammable storage per NFPA 30; alcohol-based hand rubs	<i>NFPA 101: 18/19.3.2.6</i>

6

Top 10 LSC Deficiency Areas



# Life Safety Documentation / Testing

Fire drills conducted & documented per shift	<i>NFPA 101: 21.7.1, 21.7.2</i>
Fire extinguisher monthly checks	<i>NFPA 10: 7.2.1.2</i>
Sprinkler, alarm, generator test records	<i>NFPA 25, NFPA 72, NFPA 110</i>
Annual line isolation monitor test	<i>NFPA 99 (2012), 6.3.2.6.3.4</i>
ILSM risk assessment required	<i>NFPA 101 (2012), 4.6.10.1</i>

Top 10 LSC Deficiency Areas



# Compressed Gas / Mechanical Rooms

Cylinders secured upright	<i>NFPA 99: 11.6.2.3</i>
Oxygen storage room signage ("No Smoking/Oxygen in Use")	<i>NFPA 99: 11.3.4.1</i>
No storage in mechanical/electrical rooms	<i>NFPA 101: 7.1.10.1</i>
Medical gas system inspection/testing	<i>NFPA 99 (2012), 5.1.14.2.2.2(b)</i>

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Top 10 LSC Deficiency Areas



## Fire Doors / Smoke Doors

Fire doors must self-close, latch, not propped	<i>NFPA 80: 5.2.13; NFPA 101: 8.3.3.3</i>
Labels intact, not painted over	<i>NFPA 80: 4.2.2</i>
Door undercut/gap $\leq \frac{3}{4}$ inch	<i>NFPA 80: 6.3.1.7</i>

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Top 10 LSC Deficiency Areas



# Fire Drills / Staff Training

Fire drills per shift/quarter	NFPA 101: 21.7.1, 21.7.2
Staff training & participation required	NFPA 101: 4.7.1, 4.7.2
Documentation of drills retained	NFPA 101: 4.7.5

*“Before moving on, let’s clear this up:  
what do surveyors expect to see in  
fire drill documentation?”*

10  
Top 10 LSC Deficiency Areas



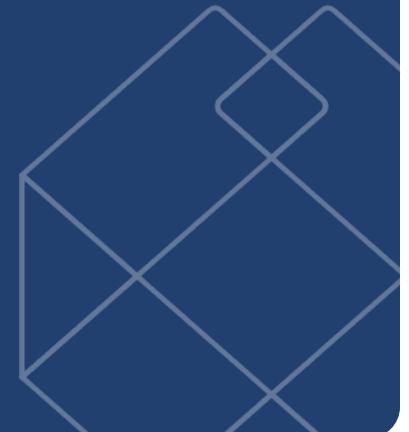
# Quarterly Fire Drill Documentation

Date and Time of the Drill	
Shift/occupancy during which the drill occurred	<i>must vary each quarter</i>
Notification method, how staff were alerted	<i>alarm, overhead, coded announcement</i>
<b>Alarm actuation</b>	<i>documentation that the fire alarm signal was transmitted</i>
Staff participation	<i>who was involved, roles performed, and staff response observed</i>
<b>Simulation of emergency conditions</b>	<i>fire location, blocked exit, patient in OR</i>
Evacuation routes used	<i>which exits or corridors were tested/discussed</i>
Use of fire response plan, RACE	<i>how staff applied the procedure</i>
Issues identified	<i>delays, confusion, equipment not working, blocked exits</i>
Corrective actions taken or planned	
Evaluator signature/title	<i>who conducted and reviewed the drill</i>



# Risk Assessments

*“ASCs perform a lot of risk assessments, but the LSC outlines particular ones we must do. Can you walk us through those?”*



# Facility Building & Category Risk Assessment

## 1 Identify Systems

Building, electrical, gas/vacuum, plumbing, HVAC, IT/communications, equipment.

## 2 Assess Risk

Determine impact if each fails (major injury/death, minor injury, discomfort, no impact).

## 3 Assign Category (1–4)

1	Failure could cause major injury/death <i>General anesthesia, deep sedation</i>	Requires Type 1 EES <i>3 branches, dual power</i>
2	Failure could cause minor injury <i>Moderate sedation, local only</i>	May use Type 2 EES <i>1 branch, dual power</i>
3 / 4	No EES required	

## 4 Documentation

- Record system, category, and rationale, keep in LS/Environment of Care files.
- Documented risk assessment, policies reflecting assigned categories.

## 5 Timing

*Governing Body approves*

- Annually
- when systems/services change.



# Wet Procedure Risk Assessment

## 1 Identify Wet Locations / NPFA 99: 6.3.2.2.8

**ALL** procedure rooms are considered wet locations unless a risk assessment proves otherwise.

## 2 Purpose

Determines if isolated power or GFCI protection is required.

## 3 Assessment Factors

Type of procedures

Equipment used

Likelihood of fluid exposure

Patient vulnerability

## 4 Documentation

Keep the assessment on file for surveyors as part of the LS/Environment of Care program

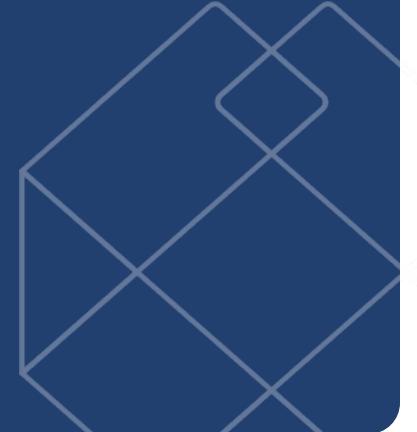
## 5 Timing

- Conducted initially (new facility, renovation).
- Repeat only if the facility's scope of service or equipment changes.
- Must be reviewed and approved by the Governing Body.



# Inspection, Testing, & Maintenance (ITM)

*“Once we’ve assigned each system a risk category, how do we decide what inspection, testing, and maintenance schedule applies, the Life Safety Code, or the manufacturer’s instructions?”*



# Did you know?

The Life Safety Code requires **certain inspections and tests to be performed by certified professionals**, while **others can be handled by your own trained staff**.

***Example: Fire alarm and sprinkler inspections must be done by qualified vendors, but monthly fire extinguisher checks and emergency light tests can be done by ASC staff once trained.***



# Core Components of ITM

## Fire Protection Systems

Fire & Smoke Barriers / Doors

Means of Egress / Emergency Lighting

Electrical Systems

Medical Gas & Vacuum Systems

Environmental Controls

Life Safety Documentation

<b>Sprinklers</b>	Inspection: <b>Quarterly &amp; annual</b> Obstruction Tests: <b>5-year</b>	<b>NFPA 25</b>
<b>Fire Alarms</b>	Testing: <b>Semiannual and annual</b>	<b>NFPA 72</b>
<b>Fire Extinguishers</b>	Vision checks: <b>Monthly</b> Maintenance: <b>Annual</b>	<b>NFPA 10</b>



# Core Components of ITM

Fire Protection Systems

## Fire & Smoke Barriers / Doors

Means of Egress / Emergency Lighting

Electrical Systems

Medical Gas & Vacuum Systems

Environmental Controls

Life Safety Documentation

<b>Fire Doors</b>	Inspection and functional testing: <b>Annual</b> <i>Doors must latch, self-close, and labels remain visible</i>	<b>NFPA 80</b>
<b>Smoke Barriers</b>	Integrity checked <b>during facility rounds</b>	<b>NFPA 101 Ch. 8</b>



# Core Components of ITM

Fire Protection Systems

Fire & Smoke Barriers / Doors

**Means of Egress / Emergency Lighting**

Electrical Systems

Medical Gas & Vacuum Systems

Environmental Controls

Life Safety Documentation

**Exit Signs & Emergency Lights**

**Egress Paths**

30-second functional tests: **Monthly**  
90-minute test with documentation: **Annual**

NFPA 101: 7.9.3



# Core Components of ITM

Fire Protection Systems

Fire & Smoke Barriers / Doors

Means of Egress / Emergency Lighting

## Electrical Systems

Medical Gas & Vacuum Systems

Environmental Controls

Life Safety Documentation

<b>Essential Electrical System (EES):</b>	Generator runs (30 min at $\geq 30\%$ load): <b>Monthly</b> 4-hour test: <b>Annual</b> Visual checks: <b>Weekly</b>	NFPA 110
<b>Wet Room Assessment</b>	GFCI or isolated power panels tested: <b>Regularly</b>	NFPA 99, Ch. 6



# Core Components of ITM

Fire Protection Systems

Fire & Smoke Barriers / Doors

Means of Egress / Emergency Lighting

Electrical Systems

**Medical Gas & Vacuum Systems**

Environmental Controls

Life Safety Documentation

<b>Cylinders</b>	Secure storage, signage, and <b>weekly</b> checks.	
<b>Systems (if piped)</b>	Inspection and maintenance: <b>Annual</b>	NFPA 99



# Core Components of ITM

Fire Protection Systems

Fire & Smoke Barriers / Doors

Means of Egress / Emergency Lighting

Electrical Systems

Medical Gas & Vacuum Systems

## Environmental Controls

Life Safety Documentation

<b>OR Humidity/ Temperature/ Air Pressure</b>	Monitored <b>Daily</b> Risk assessment if outside 20–60%
<b>ABHR Placement</b>	Reviewed for compliance with fire safety <b>Annually</b>



# Core Components of ITM

Fire Protection Systems

Fire & Smoke Barriers / Doors

Means of Egress / Emergency Lighting

Electrical Systems

Medical Gas & Vacuum Systems

Environmental Controls

**Life Safety Documentation**

Logs must include date, task, result, signature/initials of the inspector/tester

Retain for minimum 3 years  
*longer if required by state or accreditor*

Missing logs = “not done” in surveyor eyes  
***a top-cited deficiency***



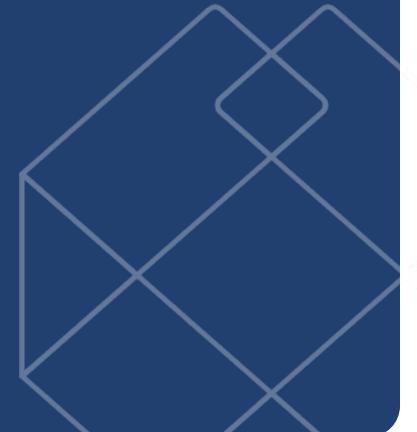
## ITM-Related Deficiencies

- Missing monthly/annual logs for emergency lighting and exit sign tests.
- Fire doors not inspected annually or propped open.
- Sprinkler heads obstructed or no 5-year internal inspection documentation.
- Generator load tests not performed to NFPA 110 standard.
- No documented fire drills on all shifts.
- Medical gas cylinders not secured or stored with empties/full mixed.
- Missing humidity/temperature monitoring logs for ORs and sterile supply areas.



# Proactive Strategies

*“Wearing your surveyor hat, what do you expect to see from a facility that’s truly proactive with LSC compliance?”*



# Did you know?

LSC surveys are easier when you're organized and collaborative. **Surveyors expect a culture of safety and accountability, not perfection.**

- **Be Ready:** have your Life Safety Binder and documentation organized
- **Be Honest:** if you don't know, say you'll find the record, don't guess
- **Be Professional:** stay calm, respectful, and cooperative
- **Be Specific:** answer with facts and show documentation quickly
- **Be Accommodating:** escort them, provide access, and take notes
- **Be Engaged:** treat feedback as learning, and link corrections to QAPI



# Risk Reduction

## Egress / Exits

Emergency Lighting / Exit Signs

Fire Protection Systems

Electrical Safety / Power Systems

Fire Barriers / Smoke Compartmentation

Storage / Sprinkle Clearance

Life Safety Documentation / Testing

Compressed Gas / Mechanical Rooms

Fire Doors / Smoke Doors

Fire Drills / Staff Training

- Remove all items stored in hallways and in front of exits; repair/replace doors that don't latch or swing properly.
- Post signage for "No Storage in Corridors," conduct monthly walkthroughs to confirm clear exit paths.



# Risk Reduction

Egress / Exits

## Emergency Lighting / Exit Signs

Fire Protection Systems

Electrical Safety / Power Systems

Fire Barriers / Smoke Compartmentation

Storage / Sprinkle Clearance

Life Safety Documentation / Testing

Compressed Gas / Mechanical Rooms

Fire Doors / Smoke Doors

Fire Drills / Staff Training

- Replace burned-out bulbs and repair non-functioning battery packs immediately.
- Test exit signs and emergency lights monthly (30 sec) and annually (90 min), documenting results.



# Risk Reduction

Egress / Exits

Emergency Lighting / Exit Signs

## Fire Protection Systems

Electrical Safety / Power Systems

Fire Barriers / Smoke Compartmentation

Storage / Sprinkle Clearance

Life Safety Documentation / Testing

Compressed Gas / Mechanical Rooms

Fire Doors / Smoke Doors

Fire Drills / Staff Training

- Correct sprinkler obstructions, ensure detectors and pull stations are accessible, repair damaged heads.
- Maintain service contracts for quarterly sprinkler inspections and annual alarm testing. Keep all records.



# Risk Reduction

Egress / Exits

Emergency Lighting / Exit Signs

Fire Protection Systems

## Electrical Safety / Power Systems

Fire Barriers / Smoke Compartmentation

Storage / Sprinkler Clearance

Life Safety Documentation / Testing

Compressed Gas / Mechanical Rooms

Fire Doors / Smoke Doors

Fire Drills / Staff Training

- Eliminate extension cords, cover open junction boxes, ensure generator load tests meet NFPA 110.
- Train staff on safe power use, include electrical checks in monthly safety rounds.



# Risk Reduction

Egress / Exits

Emergency Lighting / Exit Signs

Fire Protection Systems

Electrical Safety / Power Systems

## **Fire Barriers / Smoke Compartmentation**

Storage / Sprinkler Clearance

Life Safety Documentation / Testing

Compressed Gas / Mechanical Rooms

Fire Doors / Smoke Doors

Fire Drills / Staff Training

- Seal penetrations with approved fire-stopping material, repair or replace damaged smoke doors.
- Inspect above-ceiling spaces quarterly, include door checks in monthly facility rounds.



# Risk Reduction

Egress / Exits

Emergency Lighting / Exit Signs

Fire Protection Systems

Electrical Safety / Power Systems

Fire Barriers / Smoke Compartmentation

## Storage / Sprinkler Clearance

Life Safety Documentation / Testing

Compressed Gas / Mechanical Rooms

Fire Doors / Smoke Doors

Fire Drills / Staff Training

- Relocate items stored within 18 inches of sprinkler heads; remove supplies from mechanical/electrical rooms.
- Post signage (“No Storage”), assign a staff member to audit storage areas monthly.



# Risk Reduction

Egress / Exits

Emergency Lighting / Exit Signs

Fire Protection Systems

Electrical Safety / Power Systems

Fire Barriers / Smoke Compartmentation

Storage / Sprinkler Clearance

## Life Safety Documentation / Testing

Compressed Gas / Mechanical Rooms

Fire Doors / Smoke Doors

Fire Drills / Staff Training

- Catch up on missing fire drills, extinguisher inspections, or generator/sprinkler tests. Keep all logs updated.
- Create a compliance calendar with reminders and assign responsibility to specific staff.



# Risk Reduction

Egress / Exits

Emergency Lighting / Exit Signs

Fire Protection Systems

Electrical Safety / Power Systems

Fire Barriers / Smoke Compartmentation

Storage / Sprinkler Clearance

Life Safety Documentation / Testing

**Compressed Gas / Mechanical Rooms**

Fire Doors / Smoke Doors

Fire Drills / Staff Training

- Secure all cylinders upright, add required signage, remove clutter from mechanical rooms.
- Train staff annually on NFPA 99 storage rules, designate a gas cylinder “safety officer” for weekly checks.



# Risk Reduction

Egress / Exits

Emergency Lighting / Exit Signs

Fire Protection Systems

Electrical Safety / Power Systems

Fire Barriers / Smoke Compartmentation

Storage / Sprinkler Clearance

Life Safety Documentation / Testing

Compressed Gas / Mechanical Rooms

**Fire Doors / Smoke Doors**

Fire Drills / Staff Training

- Remove door wedges, repair closing/latching hardware, uncover painted-over labels.
- Add “Do Not Prop” signage, test all fire doors quarterly, train staff to report door issues immediately.



# Risk Reduction

Egress / Exits

Emergency Lighting / Exit Signs

Fire Protection Systems

Electrical Safety / Power Systems

Fire Barriers / Smoke Compartmentation

Storage / Sprinkler Clearance

Life Safety Documentation / Testing

Compressed Gas / Mechanical Rooms

Fire Doors / Smoke Doors

**Fire Drills / Staff Training**

- Conduct make-up drills on any missed shifts, retrain staff unfamiliar with evacuation roles.
- Schedule quarterly drills in advance, vary scenarios, keep complete drill documentation.

*“We’ve covered a lot today...  
What are your key takeaways?”*

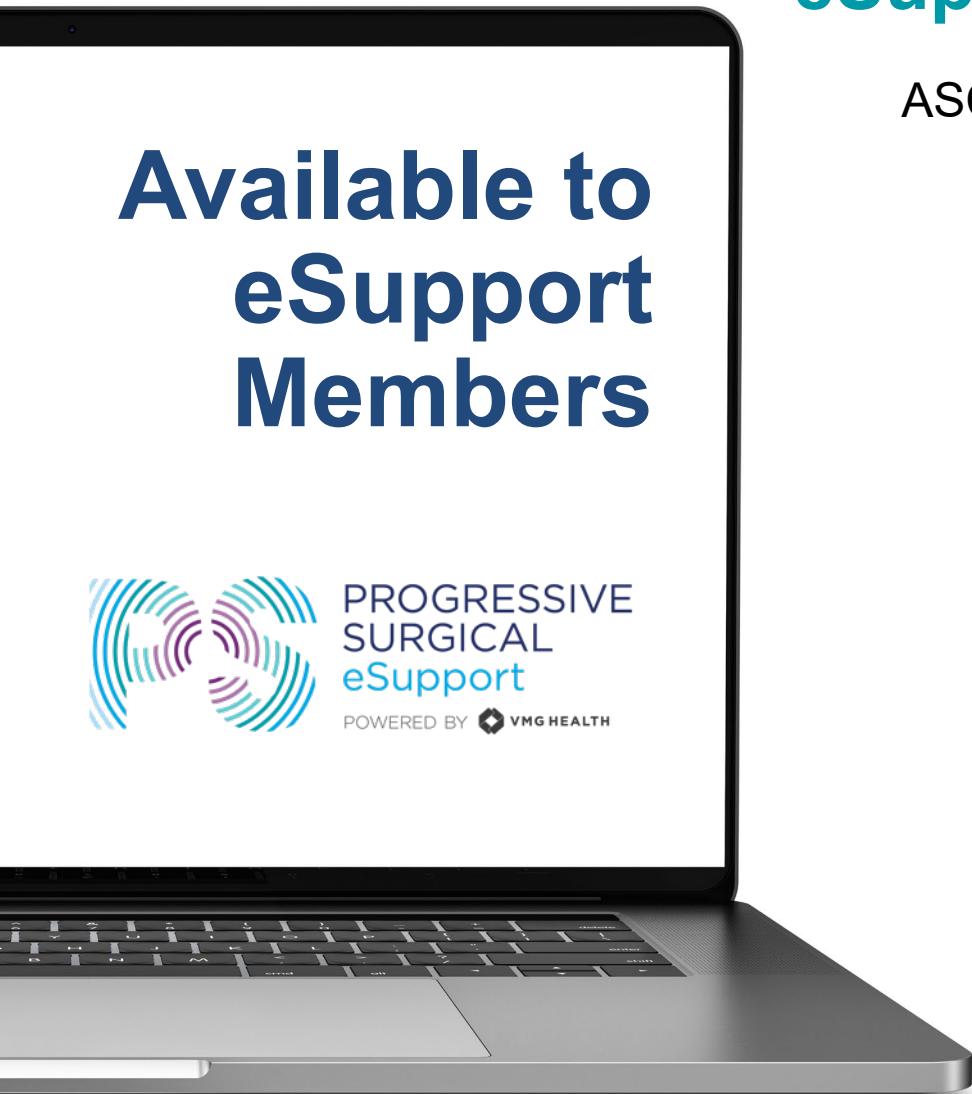


# Key Learnings and Takeaways

<b>Document Everything</b>	If it's not logged, it's not done
<b>Inspect Daily</b>	Build safety checks into routine operations
<b>Test On Schedule</b>	Follow LSC frequencies for fire, electrical, and gas systems
<b>Maintain Proactively</b>	Fix issues before surveyors find them
<b>Engage Staff</b>	Everyone plays a role in spotting and reporting risks
<b>Review Annually</b>	Risk assessments, ITM results, and QAPI must be updated and approved by the Governing Body



***Life Safety compliance is an ongoing, constant process!***



## eSupport > Compliance Calendar

# ASC Compliance Calendar: Life Safety Codes

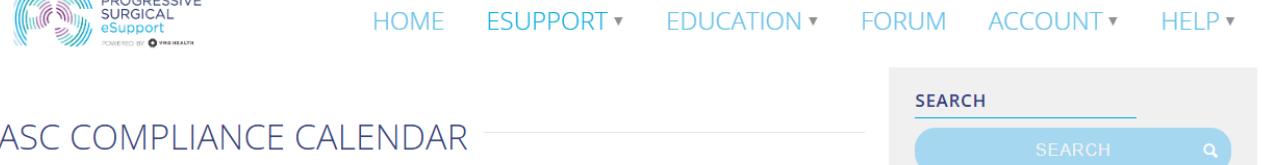
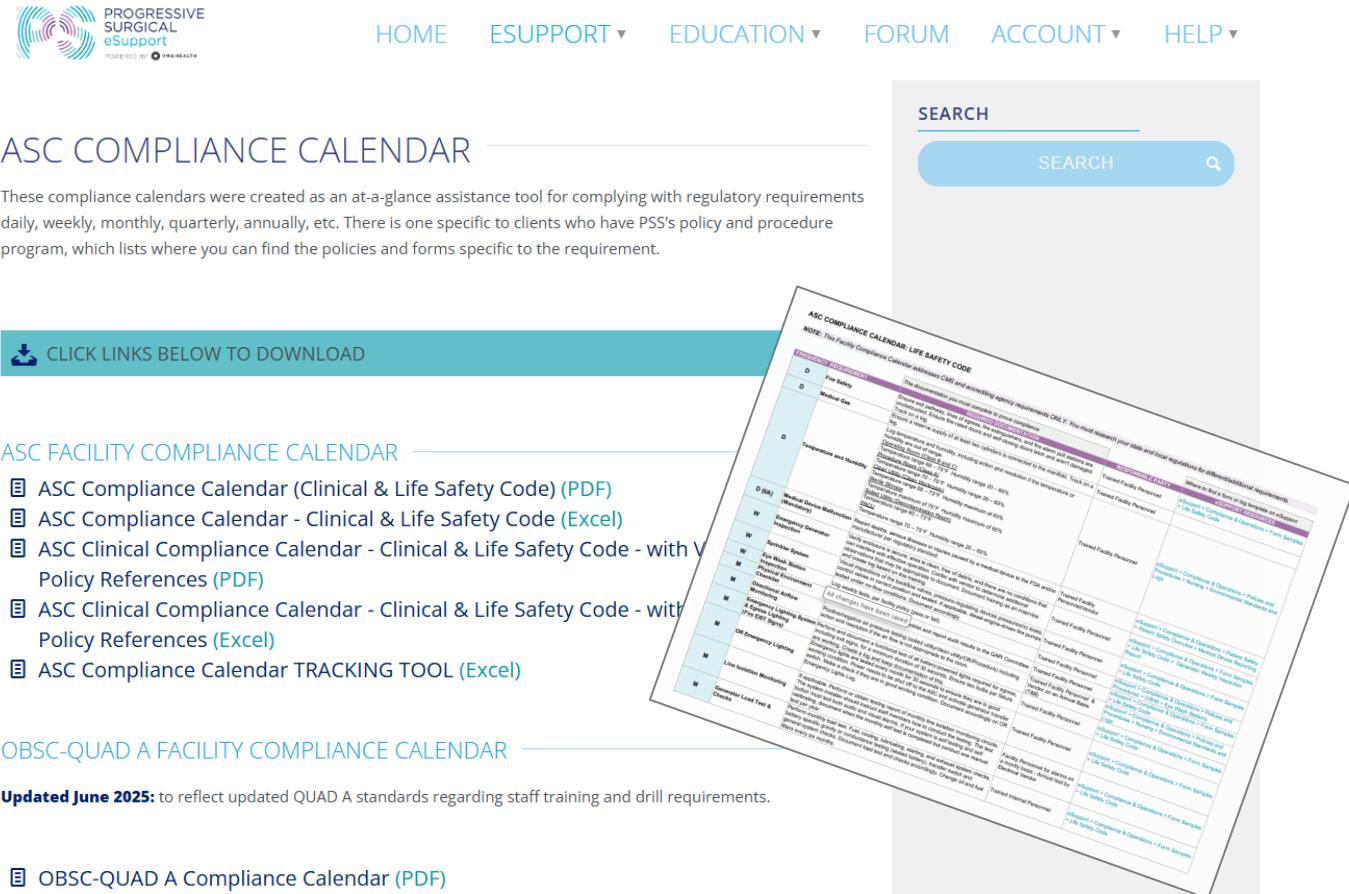
# Available to eSupport Members



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ASC COMPLIANCE CALENDAR

These compliance calendars were created as an at-a-glance assistance tool for complying with regulatory requirements daily, weekly, monthly, quarterly, annually, etc. There is one specific to clients who have PSS's policy and procedure program, which lists where you can find the policies and forms specific to the requirement.

 CLICK LINKS BELOW TO DOWNLOAD

## ASC FACILITY COMPLIANCE CALENDAR

- █ [ASC Compliance Calendar \(Clinical & Life Safety Code\) \(PDF\)](#)
- █ [ASC Compliance Calendar - Clinical & Life Safety Code \(Excel\)](#)
- █ [ASC Clinical Compliance Calendar - Clinical & Life Safety Code - with Policy References \(PDF\)](#)
- █ [ASC Clinical Compliance Calendar - Clinical & Life Safety Code - with Policy References \(Excel\)](#)
- █ [ASC Compliance Calendar TRACKING TOOL \(Excel\)](#)

## OBSC-QUAD A FACILITY COMPLIANCE CALENDAR

**Updated June 2025:** to reflect updated QUAD A standards regarding staff training and drill requirements

 OBSC-QUAD A Compliance Calendar (PDF)

# eSupport > Form Samples > Life Safety Code

Available to  
eSupport  
Members



Physical Environment Checklist  
Life Safety Code Forms and Logs  
Testing Requirement References  
Systems ITM Checklist

The screenshot shows the eSupport website interface. At the top, there is a navigation bar with links for HOME, ESUPPORT, EDUCATION, FORUM, ACCOUNT, and HELP. On the left, there is a sidebar with a search bar and a 'FORM SAMPLES' section containing links for 'Form Samples Overview', 'Medical Record Forms', 'Laser Procedures (Ophthalmology)', 'Life Safety Code' (which is highlighted in blue), and 'Nursing'. The main content area displays the 'FORM SAMPLES: LIFE SAFETY CODE' page. It includes a sub-section for 'PHYSICAL ENVIRONMENT CHECKLIST' with a 'MONTHLY REQUIREMENT' section and a link to the 'Physical Environment Checklist (updated DEC 2023)'. Another sub-section for 'LIFE SAFETY CODE FORMS AND LOGS' includes links for 'Emergency Call System Testing Log', 'Emergency Exit Signs Log', 'Fire Extinguisher Monthly Check', and 'Fire Systems and Safety Inspection Log'. A large blue button in the center says 'CLICK LINKS BELOW TO DOWNLOAD'.

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HOME ESUPPORT EDUCATION FORUM ACCOUNT HELP

SEARCH

FORM SAMPLES

Form Samples Overview  
Medical Record Forms  
Laser Procedures (Ophthalmology)  
**Life Safety Code**  
Nursing

FORM SAMPLES: LIFE SAFETY CODE

If you have any questions regarding compliance with Life Safety Code requirements, please contact us to inquire about consulting services with our Life Safety Code expert [courtney@pss4asc.com](mailto:courtney@pss4asc.com)

CLICK LINKS BELOW TO DOWNLOAD

PHYSICAL ENVIRONMENT CHECKLIST

**MONTHLY REQUIREMENT**

Designated Personnel, appointed by the facility, shall conduct an environmental tour every month of all patient care areas in an effort to provide a safe and sanitary environment for patients, staff and visitors. The overall objective is to identify and eliminate any risks in the physical environment of care.

**December 2023:** Reflects the new monthly ANSI / AAMI standards for Critical Water Testing.

**May 2023:** Updated to reflect more detailed Life Safety Code requirements for inspection, testing, and maintenance of fire systems and additional physical plant safety items. Surveyors are hyper-focused on Life Safety requirements. Make sure you have the most current version of this form.

[Physical Environment Checklist \(updated DEC 2023\)](#)

LIFE SAFETY CODE FORMS AND LOGS

[Emergency Call System Testing Log](#)  
 [Emergency Exit Signs Log](#)  
 [Fire Extinguisher Monthly Check](#)  
 [Fire Systems and Safety Inspection Log](#)





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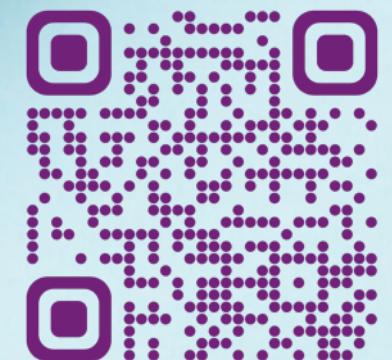
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less  
RUNNING AN ASC CAN BE OVERWHELMING

# CE Credit

VMG Health is approved by the California Board of Registered Nurses, Provider #17841 and BASC, Provider #1016.



RN	1 CE Contact Hour
CASC	1 AEU



Complete Course  
Evaluation sent  
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**Friday,  
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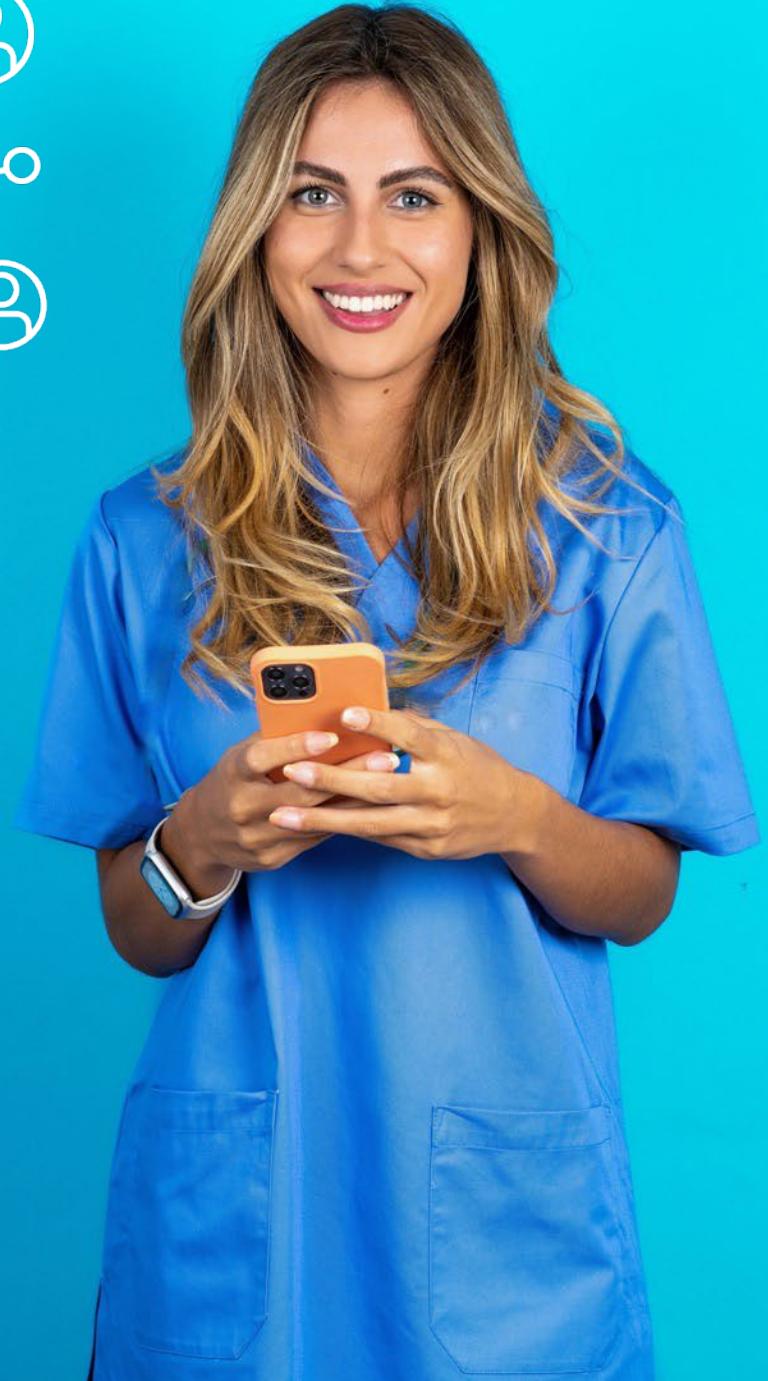


Allow up to 2 weeks  
to process your  
certificates



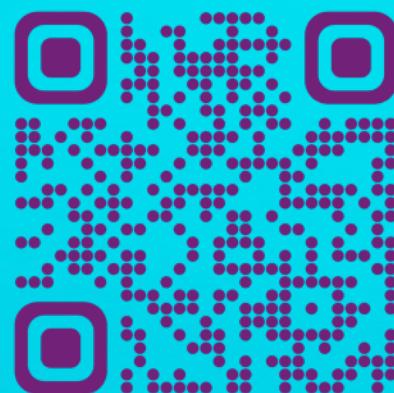
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A place to **connect, support, and network** with other ASC managers all over the country.



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# Register

APRIL 17 - 18, 2026  
DALLAS, TX

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A photograph of a pair of white over-ear headphones resting on a silver laptop, which is open and facing towards the right. The background is a blurred beach scene with the ocean and sky.

# 2026 WEBINAR CALENDAR *Now Available!*



# Upcoming Webinars

DATE	⌚	CE	WEBINAR TOPIC	SPEAKER
JAN 12	20		<b>2026 ASC Quality Reporting Update</b>	<b>Gina Throneberry,</b> MBA, BSN, RN, CASC, CNOR <i>ASC Association</i>
FEB 27	60	RN, CASC	<b>Blueprint for ASC Staff Education</b>	<b>Apryl McElheny</b> MBA, MSN, RN, CASC, CIC <i>VMG Health</i>
MAR 30	20		<b>Staff Utilization: How to take Data and Improve Benchmarks</b>	<b>Vanessa Sindell</b> MSN, BSN, RN, CAIP <i>VMG Health</i>

