

**Iowa Department of Inspections and Appeals  
Health Facilities Division  
Citation**

FC#6445	Deleted on June 9, 2017, following the Informal Dispute Resolution decision.	Date: February 9, 2017		
New Hampton Nursing and Rehabilitation		Survey Dates: January 23-26,2017		
703 S. 4 <sup>th</sup> Ave.				
New Hampton, Iowa 50659	DS/kk			
		<b>Class</b>	<b>Fine Amount</b>	<b>Correction date</b>
58.19(2)b	<p><b>481-58.19(135C) Required nursing services for residents.</b> The resident shall receive and the facility shall provide, as appropriate, the following required nursing services under the 24 hour direction of qualified nurses with ancillary coverage as set forth in these rules:  <b>58.19(2) Medication and treatment.</b>  <i>b.</i> Provision of the appropriate care and treatment of wounds, including pressure sores, to promote healing, prevent infection, and prevent new sores from developing; (I,II).</p>	I	\$2,000	

\_\_\_\_\_  
Facility Administrator

\_\_\_\_\_  
Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or withdraw your request for formal hearing, and (2) pay the penalty, the assessed penalty will be reduced by thirty-five percent (35%) pursuant to Iowa Code section 135C.43A (Supp. 2009).

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