

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 01D0303841	(X3) Date Survey Completed 05/09/2018
Name of Provider or Supplier Crenshaw Community Hospital	Street Address, City, State 101 Hospital Circle, Luverne, AL	
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
D5217	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1)</p> <p>At least twice annually, the laboratory must verify the accuracy of any test or procedure it performs that is not included in subpart I of this part.</p> <p>This STANDARD is not met as evidenced by: Based on a review of the laboratory test menu, proficiency testing (PT) records, and an interview with the Technical Consultant, the surveyor determined the laboratory failed to either enroll in PT or implement another method of semi-annual accuracy verification for Vitamin B12, Folate and Ammonia testing in 2016-2017. The findings include: 1. A review of the API (American Proficiency Institute) PT records revealed the laboratory did not perform PT for Vitamin B12, Folate, or Ammonia in 2016 and 2017. A review of patient records revealed these tests were in use for patient testing since before the previous survey on 8/9/2016. 2. In an interview on 5/19/2018 at 10:00 AM, the Technical Consultant (also the Laboratory Manager) was asked if the laboratory had performed PT on Vitamin B12, Folate, or Ammonia in 2016 and 2017, or if the laboratory had implemented another method of accuracy verification for these tests. The Technical Consultant stated she had missed including these tests on the PT order in 2016-17, and confirmed the laboratory had not implemented another method to verify their accuracy semi-annually. SURVEYOR: Laura T. Williams, BS, MT (ASCP)Licensure and Certification Surveyor</p>