

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 01D0665601	(X3) Date Survey Completed 09/21/2021
Name of Provider or Supplier Bbh Pcn Gardendale	Street Address, City, State 430 Fieldstown Road, Gardendale, 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
D2016	SUCCESSFUL PARTICIPATION CFR(s): 493.803(a)(b)(c) (a) Each laboratory performing nonwaived testing must successfully participate in a proficiency testing program approved by CMS, if applicable, as described in subpart I of this part for each specialty, subspecialty, and analyte or test in which the laboratory is certified under CLIA. (b) Except as specified in paragraph (c) of this section, if a laboratory fails to participate successfully in proficiency testing for a given specialty, subspecialty, analyte or test, as defined in this section, or fails to take remedial action when an individual fails gynecologic cytology, CMS imposes sanctions, as specified in subpart R of this part. (c) If a laboratory fails to perform successfully in a CMS-approved proficiency testing program, for the initial unsuccessful performance, CMS may direct the laboratory to undertake training of its personnel or to obtain technical assistance, or both, rather than imposing alternative or principle sanctions except when one or more of the following conditions exists: (1) There is immediate jeopardy to patient health and safety. (2) The laboratory fails to provide CMS or a CMS agent with satisfactory evidence that it has taken steps to correct the problem identified by the unsuccessful proficiency testing performance. (3) The laboratory has a poor compliance history. This CONDITION is not met as evidenced by: Based on a review of the CMS (Centers for Medicare and Medicaid Services) CASPER reports and a review of the API (American Proficiency Institute) proficiency testing evaluations, the surveyor determined the laboratory failed to successfully participate in Hematology testing for the Platelet Count for two consecutive testing events, Event #1 and #2, 2021, resulting in an initial unsuccessful proficiency testing failure for the laboratory. The findings include: 1. A review of the CMS CASPER reports revealed the laboratory scored 60 % (percent) for Platelets for Events #1 and

	#2, 2021, resulting in an initial unsuccessful proficiency testing failure for the laboratory. 2. A review of the API proficiency testing evaluations confirmed the above noted findings.
D2130	HEMATOLOGY CFR(s): 493.851(f) Failure to achieve satisfactory performance for the same analyte in two consecutive events or two out of three consecutive testing events is unsuccessful performance. This STANDARD is not met as evidenced by: Based on a review of the CMS (Centers for Medicare and Medicaid Services) CASPER reports and a review of the API (American Proficiency Institute) proficiency testing evaluations, the surveyor determined the laboratory failed to satisfactorily perform in Platelet Count testing (Hematology) for two consecutive testing events, Event #1 and #2, 2021, resulting in an initial unsuccessful proficiency testing failure for the laboratory. The findings include: 1. A review of the CMS CASPER reports revealed the laboratory scored 60 % (percent) for Platelets for Events #1 and #2, 2021, resulting in an initial unsuccessful proficiency testing failure for the laboratory. 2. A review of the API proficiency testing evaluations confirmed the above noted findings.