

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 01D2026234	(X3) Date Survey Completed 05/16/2024
Name of Provider or Supplier Medcenter Demopolis Pc	Street Address, City, State 705 Highway 80 West, Demopolis, 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
D2127	<p>HEMATOLOGY CFR(s): 493.851(d)</p> <p>Failure to return proficiency testing results to the proficiency testing program within the time frame specified by the program is unsatisfactory performance and results in a score of 0 for the testing event.</p> <p>This STANDARD is not met as evidenced by: Based on a review of Proficiency Testing (PT) records and an interview with Testing Personnel #1, the laboratory failed to submit Proficiency Testing scores by the deadline set by Medical Laboratory Evaluation (MLE). This was noted for one out of five PT events reviewed from the date of the last survey, 8/11/2022, to the date of the current survey, 5/16/2024. The findings include: 1. A review of MLE PT records revealed the laboratory scored 0% for 2023 M2. A self evaluation was performed and found the laboratory to meet 100% of the published results. 2. During an interview on 5/6/2024 at 1:30 PM, Testing Personnel #1 confirmed the above findings.</p>