

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 01D2063599	(X3) Date Survey Completed 07/20/2022
Name of Provider or Supplier Medcenter Hoover	Street Address, City, State 1575 Montgomery Highway, Hoover, 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 the review of the MLE (Medical Laboratory Evaluation) Proficiency Testing (PT) records and an interview with Testing Personnel #1, the laboratory failed to submit proficiency testing results by the submission deadlines for Hematology 2021 Event #2. This was noted for one of eight Hematology PT Events. The findings include: 1. A review of the Hematology 2021 Event #2 records revealed the samples were tested on 05/17/2021, however the laboratory failed to submit the results by the 05/28/2021 deadline specified by MLE. 2. During an interview on 07/20/2022 at 10:51 AM, Testing Personnel #1 stated that the previous Clinical Director failed to submit the Proficiency Testing results by the MLE survey deadline.</p>