Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	02D0641826	09/16/2026
Name of Provider or Supplier	**Street Address, City, State**	
Cordova Community Medical Center	602 Chase Avenue, Cordova, AK	

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
D5215	EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(b)(2) The laboratory must verify the accuracy of any analyte, specialty or subspecialty assigned a proficiency testing score that does not reflect laboratory test performance (that is, when the proficiency testing program does not obtain the agreement required for scoring as specified in subpart I of this part, or the laboratory receives a zero score for nonparticipation, or late return or results). This STANDARD is not met as evidenced by: Based on record review of American Proficiency Institute (API) test results, laboratory proficiency testing (PT) evaluation reports, and an interview with the technical consultant (TC), the laboratory failed to review and evaluate ungraded and unacceptable test results for four (4) of eight (8) proficiency testing events in 2026 and 2025. The findings include: 1. Review of PT results revealed not graded or unacceptable results for a. 2025 Microbiology- 3rd event C. difficile Antigen, Influenza A, and SARS-CoV2. b. 2025 Chemistry Core- 3rd event Alcohol, BNP, and Bilirubin, Total c. 2026 Chemistry core- 1st event BNP, ALT/SGPT, and Bilirubin, Total d. 2026 Chemistry Core- 2nd event Bilirubin Direct, Cholesterol Total, Glucose, and Sodium 2. Review of PT evaluation reports showed "no corrective action necessary" written or lack of corrective action for the results. 3. An interview with the TC on 09/16/2026 at 0920 A.M. confirmed no actions were taken. 4. The laboratory reports performing 7333 tests annually in the specialties of Microbiology and Chemistry.
D6004	LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1407(a)(b) The laboratory director is responsible for the overall operation and administration of the laboratory, including the employment of personnel who are competent to perform

	test procedures, and record and report test results promptly, accurate, and proficiently and for assuring compliance with the applicable regulations. (a) The laboratory director, if qualified, may perform the duties of the technical consultant, clinical consultant, and testing personnel, or delegate these responsibilities to personnel meeting the qualifications of 493.1409, 493.1415, and 493.1421, respectively. (b) If the laboratory director reapportions performance of his or her responsibilities, he or she remains responsible for ensuring that all duties are properly performed. This STANDARD is not met as evidenced by: Based on records review of competency assessments and personnel credentials and an interview with the Technical Consultant (TC), the Laboratory Director (LD) failed to ensure competency assessments were performed by staff who have technical consultant qualifications for one (1) of three (3) testing personnel (TP) in 2025 and 2026. The findings include: 1. A review of competency assessment documents for TP1 for Sysmex XN, Axcel, Triage, iSTAT, and HcG revealed that competency was assessed and signed by TP2 in 2025 and 2026. 2. A review of staff education and credentials showed TP2 did not qualify as technical consultant based on lack of appropriate educational degree (493.1411(b)(4)(i)(A)). 3. An interview with the TC on 9/15/2026 at 1630 confirmed TP2 performed competency assessments but was not delegated by the LD. 4. The laboratory reports performing 9738 tests in the specialty of Chemistry and Hematology annually.