Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	03D0533657	03/31/2026
Name of Provider or Supplier	**Street Address, City, State**	
White Mountain Regional Medical Center	118 S Mountain Ave, Springerville, AZ	

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
D5417	TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(d) (d) Reagents, solutions, culture media, control materials, calibration materials, and other supplies must not be used when they have exceeded their expiration date, have deteriorated, or are of substandard quality. This STANDARD is not met as evidenced by: Based on direct observation of the Gram Iodine stain reagent used to perform Gram Stains and interview with the General Supervisor (GS-1) on 3/31/26 at 3:10 PM, the laboratory used the Gram Iodine stain reagent for patient testing past the expiration date on 2 out of 2 testing dates in March 2026. Findings include: 1. The laboratory performs Gram Stain testing in the specialty of Microbiology, with a reported annual test volume of 167. 2. Direct observation of the Remel Gram Iodine stain reagent on 3 /31/26 revealed the stain reagent was expired as follows: lot# 144715, expiration date 2/04/26. 3. The laboratory utilized the Gram Iodine reagent past the manufacturer's expiration date on two testing dates, 3/26/26 and 3/28/26. Two patients were tested using the expired Gram Iodine reagent on those dates. 4. GS-1 interviewed on 3/31/26 at 3:10 PM confirmed the expired Gram Iodine stain reagent indicated above was used for patient testing past the manufacturer's expiration date and was in use at the time of the survey.
D5813	TEST REPORT CFR(s): 493.1291(g) (g) The laboratory must immediately alert the individual or entity requesting the test and, if applicable, the individual responsible for using the test results when any test result indicates an imminently life-threatening condition, or panic or alert values.

	This STANDARD is not met as evidenced by: Based on review of the laboratory's critical value policy, review of two out of two test reports for Arterial Blood Gas (ABG) testing, and interview with the testing personnel (TP-1) on 3/31/26 at 3:55 PM, the laboratory failed to immediately alert the individual or entity requesting the test when the ABG test result indicates an imminently life-threatening condition, or panic or alert values. Findings include: 1. The laboratory performs ABG testing on the RapidPoint 500e analyzer. The laboratory's reported annual test volume for ABG testing is 825. 2. The laboratory's established critical value policy states, "The critical result will be called to the Primary Nurse, Charge Nurse or Provider. The Critical Results notification requires a read-back verification of the patient identification, the Critical Result and confirmation of the person receiving the results. The laboratory technologist will then record this information in the comments section of the laboratory report." 3. Two out of two test reports reviewed for ID#10205085 for ABG testing performed on 2/24/26 at 1723 and 2/24 /26 at 1853 indicated critical low test results for pH (7.22 and 7.22, respectively) and critical high test results for pCO2 (78.8 mmHg and 79 mmHg, respectively). 4. No documentation was presented for review to indicate the laboratory notified the individual or entity requesting the test of the critical ABG test values for the patient indicated above, as indicated in laboratory policy. 5. TP-1 interviewed on 3/31/26 at 3: 55 PM confirmed the laboratory failed to provide evidence showing the individual or entity requesting the test was immediately notified of the critical pH and pCO2 test results referenced above.