

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 04D0465612	(X3) Date Survey Completed 07/28/2023
Name of Provider or Supplier Strong Clinic	Street Address, City, State 253 South Concord, Strong, AR	
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
D5391	<p>PREANALYTIC SYSTEMS QUALITY ASSESSMENT CFR(s): 493.1249(a)</p> <p>The laboratory must establish and follow written policies and procedures for an ongoing mechanism to monitor, assess, and when indicated, correct problems identified in the preanalytic systems specified at 493.1241 through 493.1242.</p> <p>This STANDARD is not met as evidenced by: Based on written procedures and interview, laboratory failed to follow written Quality Assurance Plan to monitor, assess and correct problems with Test Tracking via Requisitions. Findings Follow: A). The Quality Assurance Plan states, "2. Test Tracking via Requisitions: 20 requisitions will be randomly pulled and evaluated two times each year for their inclusion of: name and address of healthcare provider ordering the tests, patient name, order date, patient sex, and date of birth. Each requisition will be examined for completeness in the aforementioned categories. Any deviation from 100% will be noted. Since test requisitioned are computer generated, problems will be brought to the attention of the IT department and corrected ASAP". Laboratory could not provide any documentation of the twenty selected records twice per year for year 2022. B) The Technical Consultant on the CMS 209 form confirmed only selecting five random records during interview on July 28, 2023, at 1:25 PM.</p>