

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  04D0468157	<b>(X3) Date Survey Completed</b>  02/06/2024
<b>Name of Provider or Supplier</b>  Nea Baptist Clinic - Trumann	<b>Street Address, City, State</b>  516 Industrial Drive, Trumann, AR	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D2010</b>	<p><b>TESTING OF PROFICIENCY TESTING SAMPLES</b> CFR(s): 493.801(b)(2)</p> <p>The laboratory must test samples the same number of times that it routinely tests patient samples.</p> <p>This STANDARD is not met as evidenced by: Through a review of proficiency test documentation for 2023, the laboratory policy and procedure for the external quality control program, the listing of "NEA Baptist Alert Values", the data log for the Sysmex XP300 complete blood cell (CBC) analyzer, and interview, the surveyor determined the laboratory failed to test proficiency samples the same number of times that it routinely tests patient samples. Survey findings include: A) The Surveyor reviewed the Proficiency Test documentation for the Second Hematology Events of 2023 . Five of five proficiency test samples were tested in duplicate. B) Review of the laboratory policy and procedure for external quality control program revealed "the laboratory must test the proficiency testing samples in the same manner as it tests patient specimens". C) Review of the NEA Baptist Alert Values policy and procedure revealed that "all alert values should be rerun for confirmation" and it defined alert values for the components of CBC testing. D) Review of the Sysmex XP 300 hematology analyzer data log revealed that on 7/13/23 all five of the proficiency testing samples were tested in duplicate and samples, HSY-06, HSY -09, and HSY-10 did not have any results that were considered to be "alert values" according to the laboratory's Alert Value policy and procedure. Further review of the data log revealed that all patients were run a single time unless results were such that they should be run in duplicate according to laboratory policy and procedure. E) In an interview, at 03:30 p.m. on 2/6 /24, laboratory employee ( #3 on the CMS 209 form) confirmed all proficiency samples were run in duplicate, including those whose results would not be required to be run in duplicate according to laboratory policy and procedure.</p>