

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 04D0933981	(X3) Date Survey Completed 08/22/2018
Name of Provider or Supplier Northwest Medical Plaza- Westside	Street Address, City, State 4077 Elm Springs Rd Ste 105, Springdale, 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
D5785	<p>CORRECTIVE ACTIONS CFR(s): 493.1282(b)(3)</p> <p>(b) The laboratory must document all corrective actions taken, including actions taken when any of the following occur: (b)(3) The criteria for proper storage of reagents and specimens, as specified under 493.1252(b), are not met.</p> <p>This STANDARD is not met as evidenced by: Through a review of the laboratory temperature log, lack of documentation, and interviews with laboratory staff, it was determined the laboratory failed to document corrective actions when refrigerator temperatures were outside of the acceptable range. Survey findings follow: A. The laboratory temperature log for September 2017 included five days out of twenty when refrigerator temperatures were documented outside of the acceptable range listed on the form (2 to 8 degrees Celsius). B. The laboratory temperature log for October 2017 included thirteen days out of twenty-two when refrigerator temperatures were documented outside of the acceptable range listed on the form. C. The laboratory temperature log for November 2017 included two days out of eighteen when refrigerator temperatures were documented outside of the acceptable range listed on the form (2 to 8 degrees Celsius). D. The laboratory temperature log for December 2017 included six days out of nineteen when refrigerator temperatures were documented outside of the acceptable range listed on the form (2 to 8 degrees Celsius). E. For each temperature failure listed above there was no documentation of corrective action and no acceptable temperatures documented on the days of the failures. F. In an interview at 11:48 on 8/22/2018, the laboratory manager confirmed the lack of documented corrective action for temperature failures.</p>
D6107	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(15)</p>

The laboratory director must specify, in writing, the responsibilities and duties of each consultant and each supervisor, as well as each person engaged in the performance of the preanalytic, analytic, and postanalytic phases of testing, that identifies which examinations and procedures each individual is authorized to perform, whether supervision is required for specimen processing, test performance or result reporting and whether supervisory or director review is required prior to reporting patient test results.

This STANDARD is not met as evidenced by:

Through a review of laboratory personnel records, lack of documentation, and interviews with staff, it was determined the laboratory director failed to give written authorization for two of two testing personnel to perform complete blood counts without direct supervision. Survey findings follow: A. The authorization to test in the personnel record for employee #1 (as listed on the form CMS-209) did not include an authorization to perform complete blood counts. B. The personnel record for employee #2 (as listed on the form CMS-209) did not include authorization to perform any test. C. In an interview at 11:20 on 8/22/2018, the laboratory manager confirmed the lack of authorizations for the two testing personnel to perform complete blood counts without supervision. She further confirmed that both testing personnel perform complete blood counts.