

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 04D2115207	(X3) Date Survey Completed 07/19/2023
Name of Provider or Supplier Ael - Conway	Street Address, City, State 2425 Dave Ward Drive, Conway, 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
D2015	<p>TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(5)(6)</p> <p>(5) The laboratory must document the handling, preparation, processing, examination, and each step in the testing and reporting of results for all proficiency testing samples. The laboratory must maintain a copy of all records, including a copy of the proficiency testing program report forms used by the laboratory to record proficiency testing results including the attestation statement provided by the PT program, signed by the analyst and the laboratory director, documenting that proficiency testing samples were tested in the same manner as patient specimens, for a minimum of two years from the date of the proficiency testing event. (6) PT is required for only the test system, assay, or examination used as the primary method for patient testing during the PT event.</p> <p>This STANDARD is not met as evidenced by: Based on review of proficiency test documentation and interviews with laboratory staff, the laboratory director failed to sign proficiency testing attestation statements for three of four proficiency events reviewed from 2022 and 2023. Survey findings include: A. A review of proficiency testing documentation from 2022 and 2023 it was determined the testing personnel failed to sign the attestation statement on the First, Second, and Third Hematology Testing Event of 2022. B. In an interview, at 12:10 p. m. on 07/19/2023, Testing Personnel #1 (as listed on the form CMS-209) confirmed the attestation statements listed above had not been signed by the testing personnel.</p>