

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  05D0618592	<b>(X3) Date Survey Completed</b>  10/02/2025
<b>Name of Provider or Supplier</b>  Modoc Medical Center	<b>Street Address, City, State</b>  1111 N Nagle St, Alturas, CA	
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>D2173</b>	<p>COMPATIBILITY TESTING CFR(s): 493.863(a)</p> <p>(a) Failure to attain an overall testing event score of at least 100 percent is unsatisfactory performance.</p> <p>This STANDARD is not met as evidenced by: Based on review of the laboratory's proficiency testing (PT) records, and interview with the Technical Supervisor (TS) on October 2, 2025, it was determined that the laboratory failed to attain a score of at least 100 percent of acceptable responses for PT testing for subspecialty of Compatibility testing in the first event of 2024. The findings included: 1. It was the practice of the laboratory to perform high complexity testing in the specialty of immunohematology and subspecialty of Compatibility testing and the laboratory enrolled in the American Proficiency Institute (API) proficiency testing (PT) program for this specialty. 2. According to the API evaluation report, the laboratory received unsatisfactory scores of 80% for compatibility testing in the first event of 2024. 3. October 2, 2025, at approximately 10:00 am, the TS confirmed that the laboratory received the above unsatisfactory proficiency scores. 4. The laboratory's testing declaration form, signed by the laboratory director on September 12, 2025, stated that the laboratory performed approximately 495 immunohematology tests annually.</p>