

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  05D0710102	<b>(X3) Date Survey Completed</b>  11/19/2020
<b>Name of Provider or Supplier</b>  Catalina Island Medical Center	<b>Street Address, City, State</b>  100 Falls Canyon Rd, Avalon, 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>D2121</b>	<p>HEMATOLOGY CFR(s): 493.851(a)</p> <p>Failure to attain a score of at least 80 percent of acceptable responses for each analyte in each testing event is unsatisfactory analyte performance for the testing event.</p> <p>This STANDARD is not met as evidenced by: Based on the surveyor's review of the laboratory's records for evaluation of proficiency testing performance and an interview with laboratory personnel (LP) on 11/19/2020 between 11:00 a.m. and 12:30 p.m, it was determined that the PT and PTT proficiency scores were below acceptable for one event (Event 1 2020). Findings include: 1. On 11/19/2020, an inspection was conducted between 11 a.m. and 12:30 p.m. 2. During a review of the laboratory documentation from AAB (agency providing the proficiency specimens), it was noted at approximately 11:45 a.m. that the laboratory had unacceptable PT and PTT results for samples 1 and 2. The LP recognized these four atypical results. 3. The findings and acceptable ranges were as follows: Sample Test Actual Result Expected Result (range) 1 PT 14.2 32.6-44.2 2 PT 42.4 11.5-15.5 1 PTT 27.2 44.5-60.2 2 PTT 52.6 23.3-31.6 4. Corrective action was completed after the scored results were returned and reviewed.</p>