

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  06D1086122	<b>(X3) Date Survey Completed</b>  11/02/2023
<b>Name of Provider or Supplier</b>  National Jewish Health	<b>Street Address, City, State</b>  400 Indiana St, Ste 230, Golden, CO	
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>D2007</b>	<p>TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(1)</p> <p>The samples must be examined or tested with the laboratory's regular patient workload by personnel who routinely perform the testing in the laboratory, using the laboratory's routine methods</p> <p>This STANDARD is not met as evidenced by: Based on a record review of proficiency testing (PT) records and an interview with the laboratory quality assurance manager, the laboratory failed to test the complete blood count (CBC) PT samples from the College of American Pathologists (CAP) by personnel who routinely test patient samples since the last survey on January 8, 2021. Findings include: 1. A review of the CAP PT documents from Event 3/2021, through Event 2/2023, revealed the laboratory failed to test the CBC PT samples by personnel who perform patient testing since the last survey. 2. An interview with the laboratory quality assurance manager on 11/2/2023, at approximately 11:30 AM, confirmed the laboratory testing personnel failed to follow the instructions for rotating the testing of PT samples with testing personnel who perform normal patient tests.</p>
<b>D5805</b>	<p>TEST REPORT CFR(s): 493.1291(c)</p> <p>The test report must indicate the following: (c)(1) For positive patient identification, either the patient's name and identification number, or a unique patient identifier and identification number. (c)(2) The name and address of the laboratory location where the test was performed. (c)(3) The test report date. (c)(4) The test performed. (c)(5) Specimen source, when appropriate. (c)(6) The test result and, if applicable, the units of measurement or interpretation, or both. (c)(7) Any information regarding the condition and disposition of specimens that do not meet the laboratory's criteria for acceptability.</p>

This STANDARD is not met as evidenced by:

Based on a record review of patient test reports and an interview with the laboratory technical consultant (TC), the laboratory failed to include the testing laboratory's name and address of where patient samples for complete blood counts (CBC) were performed since May 2023. Findings include: 1. A review of patient CBC test reports revealed the laboratory failed to ensure the name of the laboratory and the address was stated on the test reports. 2. The laboratory performed approximately 4300 CBC tests in 2023. 3. An interview on 11/2/2023, at 1:30 PM, with the TC, confirmed the laboratory name and the address was not included on the patient test reports.