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| Statement of Deficiencies | (X1) Provider/Supplier/CLIA Identification Number 11D1010218 | (X3) Date Survey Completed 05/22/2018 |
| Name of Provider or Supplier Wellstar Sylvan Grove Hospital | Street Address, City, State 1050 McDonough Road, Jackson, GA | |
| 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 |
|---------------------------|---|
| D0000 | A proficiency testing desk review was completed on May 22, 2018. At the time of the review, the laboratory was not in compliance with the Clinical Laboratory Improvement Amendments of 1988, 42 CFR 493.1 through 42 CFR 493.1780. The following deficiencies were cited: |
| D2016 | <p>SUCCESSFUL PARTICIPATION CFR(s): 493.803(a)(b)(c)</p> <p>(a) Each laboratory performing nonwaived testing must successfully participate in a proficiency testing program approved by CMS, if applicable, as described in subpart I of this part for each specialty, subspecialty, and analyte or test in which the laboratory is certified under CLIA. (b) Except as specified in paragraph (c) of this section, if a laboratory fails to participate successfully in proficiency testing for a given specialty, subspecialty, analyte or test, as defined in this section, or fails to take remedial action when an individual fails gynecologic cytology, CMS imposes sanctions, as specified in subpart R of this part. (c) If a laboratory fails to perform successfully in a CMS-approved proficiency testing program, for the initial unsuccessful performance, CMS may direct the laboratory to undertake training of its personnel or to obtain technical assistance, or both, rather than imposing alternative or principle sanctions except when one or more of the following conditions exists: (1) There is immediate jeopardy to patient health and safety. (2) The laboratory fails to provide CMS or a CMS agent with satisfactory evidence that it has taken steps to correct the problem identified by the unsuccessful proficiency testing performance. (3) The laboratory has a poor compliance history.</p> <p>This CONDITION is not met as evidenced by: Based on proficiency testing desk review using the Centers for Medicare and Medicaid (CMS) Casper Reports 155 and 153 and confirmation from the laboratory manager, the laboratory failed to maintain satisfactory performance on samples provide by the College of American Pathologist (CAP) in two consecutive events (2nd</p> |

and 3rd events of 2017), resulting in the first unsuccessful occurrence for #760 the speciality of hematology and analyte # 795 hematocrit (HCT). Findings include: Refer to D 2130

D2130

HEMATOLOGY

CFR(s): 493.851(f)

Failure to achieve satisfactory performance for the same analyte in two consecutive events or two out of three consecutive testing events is unsuccessful performance.

This STANDARD is not met as evidenced by:

Based on proficiency testing desk review using the Centers for Medicare and Medicaid (CMS) Casper Reports 155 and 153 and confirmation from the laboratory manager, the laboratory failed to maintain satisfactory performance on samples provide by the College of American Pathologist (CAP) in two consecutive events (2nd and 3rd events of 2017), resulting in the first unsuccessful occurrence for #760 the speciality of hematology and analyte # 795 hematocrit (HCT). Findings include: 1. Desk review of Casper Reports 153 and 155 disclosed the laboratory failed the subspecialty of Hematology analyte # 760 on events 2 and 3 of 2017 with scores of 50 % and failed analyte #785 HCT on events 2 and 3 of 2017 with scores of 0%. 2. Verbal and email correspondence with the laboratory manager on March 08, 2018 confirmed the laboratory failed Hematology and HCT on PT samples provided by CAP on Events 2 and 3 of 2017 resulting in the first unsuccessful performance on Hematology samples provided by CAP.