

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 13D0521010	(X3) Date Survey Completed 04/27/2023
Name of Provider or Supplier Rexburg Medical Center	Street Address, City, State 393 E 2nd North, Rexburg, ID	
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
D5785	<p>CORRECTIVE ACTIONS CFR(s): 493.1282(b)(3)</p> <p>(b) The laboratory must document all corrective actions taken, including actions taken when any of the following occur: (b)(3) The criteria for proper storage of reagents and specimens, as specified under 493.1252(b), are not met.</p> <p>This STANDARD is not met as evidenced by: Based on a review of temperature logs and an interview with the technical consultant (TC) on 4/27/2023, the laboratory failed to document corrective actions when refrigerator temperatures were outside of the established range. The findings include: 1. A review of laboratory temperature logs identified that the laboratory failed to document corrective actions for the refrigerator used to store patient samples and quality control material when it was not within the established range of 2-8 C for 11 of 23 days in November 2022. 2. An interview with the TC on 4/27/2023 at 10:19 am confirmed that the laboratory had not documented corrective actions for the out of range temperatures. 3. The laboratory reports performing 2,214 complete blood tests annually.</p>