Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number** 13D0521144	**(X3) Date Survey Completed** 12/07/2022
Name of Provider or Supplier St Mary's Health	**Street Address, City, State** 701 Lewiston St, Cottonwood, 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**
D5435	MAINTENANCE AND FUNCTION CHECKS CFR(s): 493.1254(b)(2) For equipment, instruments, or test systems developed in-house, commercially available and modified by the laboratory, or maintenance and function check protocols are not provided by the manufacturer, the laboratory must: (i) Define a function check protocol that ensures equipment, instrument, and test system performance that is necessary for accurate and reliable test results and test result reporting. (ii) Perform and document the function checks, including background or baseline checks, specified in paragraph (b)(2)(i) of this section. Function checks must be within the laboratory's established limits before patient testing is conducted. This STANDARD is not met as evidenced by: Based on a direct observation and an interview with the laboratory manager on 12/7/2022, the laboratory failed to calibrate five (5) pipettes used for laboratory testing. The findings include: 1. During the laboratory tour on 12/7/2022 a direct observation of five (5) pipettes identified that the laboratory failed to calibrate the Finnpipette II 0.5-10 ul, Finnpipette II 20- 200 ul, Finnpipette II 1000 ul, Finnpipette II 3 ml and ID-Tipmaster 12.5, 25, 30 ul pipettes since March 2021. 2. An interview with the laboratory manager on 12/7/2022 at 1:42 pm confirmed that the laboratory had no documentation of calibration for the five (5) pipettes. 3. The laboratory reports performing 198,658 tests annually.