

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 13D0521160	(X3) Date Survey Completed 05/20/2021
Name of Provider or Supplier Syringa Hospital & Clinics	Street Address, City, State 607 W Main St, Grangeville, 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
D5411	<p>TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(a)</p> <p>Test systems must be selected by the laboratory. The testing must be performed following the manufacturer's instructions and in a manner that provides test results within the laboratory's stated performance specifications for each test system as determined under 493.1253.</p> <p>This STANDARD is not met as evidenced by: Based on record review and an interview with the laboratory manager on 05/20/2021, the laboratory failed to follow the manufacturers instructions for the Medtox Scan instrument for testing drugs of abuse. The findings include: 1. A record review of the Medtox Scan package insert, page 3, the laboratory failed to follow the manufactures instructions and failed to report positive results as preliminary positive results. 2. An interview with the laboratory manager on 05/20/2021 at 09:45 AM confirmed the laboratory failed to follow the manufacturer's instructions. 3. The laboratory reports performing 576 drug of abuse patient tests annually on the Medtox Scan instrument.</p>
D5555	<p>IMMUNOHEMATOLOGY CFR(s): 493.1271(c)(f)</p> <p>(c) Blood and blood products storage. Blood and Blood products must be stored under appropriate conditions that include an adequate temperature alarm system that is regularly inspected. (c)(1) An audible alarm system must monitor proper blood and blood product storage temperature over a 24-hour period. (c)(2) Inspections of the alarm system must be documented. (f) Documentation. The laboratory must document all control procedures performed, as specified in this section.</p> <p>This STANDARD is not met as evidenced by:</p>

Based on an observation of the immunohematology thermometer alarm system and corresponding documentation, and an interview with the laboratory manager on 05/20/2021, the laboratory failed to document inspecting the alarm system for the refrigerator temperature where blood and blood products are stored. The findings include: 1. An observation of the laboratory's alarm system documentation on 05/20/2021 at 1:30 PM revealed that the laboratory failed to document the regular inspection of the immunohematology refrigerator alarm system since the time of the previous survey on 02/26/2019. 2. An interview with the laboratory manager on 05/20/2021 at 1:30 PM confirmed that the laboratory failed to document the inspection of the immunohematology refrigerator alarm since the time of the last survey on 02/26/2019. 3. The laboratory reports performing 340 immunohematology patient tests annually.