Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	13D0698823	01/08/2025
Name of Provider or Supplier	**Street Address, City, State**	
Franklin County Medical Center	44 N 1st E, Preston, 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
D0000	During an offsite paper revisit the laboratory was found to be in compliance with CLIA regulations (42 CFR Part 493 effective April 24, 2003.), all previous deficiencies found were corrected.
D5403	PROCEDURE MANUAL CFR(s): 493.1251(b) (b) The procedure manual must include the following when applicable to the test procedure: (b)(1) Requirements for patient preparation; specimen collection, labeling, storage, preservation, transportation, processing, and referral; and criteria for specimen acceptability and rejection as described in 493.1242. (b)(2) Microscopic examination, including the detection of inadequately prepared slides. (b)(3) Step-by-step performance of the procedure, including test calculations and interpretation of results. (b)(4) Preparation of slides, solutions, calibrators, controls, reagents, stains, and other materials used in testing. (b)(5) Calibration and calibration verification procedures. (b)(6) The reportable range for test results for the test system as established or verified in 493.1253. (b)(7) Control procedures. (b)(8) Corrective action to take when calibration or control results fail to meet the laboratory's criteria for acceptability. (b)(9) Limitations in the test methodology, including interfering substances. (b)(10) Reference intervals (normal values). (b)(11) Imminently life-threatening test results, or panic or alert values. (b)(12) Pertinent literature references. (b)(13) The laboratory's system for entering results in the patient record and reporting patient results including, when appropriate, the protocol for reporting imminently life threatening results, or panic, or alert values. (b)(14) Description of the course of action to take if a test system becomes inoperable. This STANDARD is not met as evidenced by: Based on a review of the laboratory procedures, Unico centrifuge RPM verification records, and interview with the laboratory manager on 1/7/2025, the laboratory failed to follow their procedure for microscopic urinalysis centrifugation speed. The findings

	include: 1. A review of the laboratory's microscopic urinalysis procedure identified that 10-12 ul urine is centrifuged at 1500-2000 RPM for 3 minutes. 2. A review of the Unico centrifuge RPM verification performed on 10/16/2024 listed the RPM as 3428, identifying that the laboratory failed to follow their procedure for microscopic urinalysis sample centrifuge speed. 3. An interview with the laboratory manager on 1/7 /2025 at 2:43 pm confirmed the above findings. 4. The laboratory reports performing 1,816 microscopic urinalysis examinations annually.