

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 13D2027091	(X3) Date Survey Completed 04/10/2018
Name of Provider or Supplier Arthritis Specialty Center	Street Address, City, State 1448 E Center St #B, Pocatello, 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
D2000	<p>ENROLLMENT AND TESTING OF SAMPLES CFR(s): 493.801</p> <p>Each laboratory must enroll in a proficiency testing (PT) program that meets the criteria in subpart I of this part and is approved by HHS. The laboratory must enroll in an approved program or programs for each of the specialties and subspecialties for which it seeks certification. The laboratory must test the samples in the same manner as patients' specimens. For laboratories subject to 42 CFR part 493 published on March 14, 1990 (55 FR 9538) prior to September 1, 1992, the rules of this subpart are effective on September 1, 1992. For all other laboratories, the rules of this subpart are effective January 1, 1994.</p> <p>This CONDITION is not met as evidenced by: Based on proficiency testing (PT) record review and an interview with the laboratory manager, the laboratory failed to enroll in PT for the Immunoglobulin G and Immunoglobulin A analytes since the last survey on July 11, 2016. Findings: 1. A PT record review from the American Proficiency Institute (API), revealed the laboratory failed to enroll in PT for the analytes Immunoglobulin G and Immunoglobulin A. 2. An interview on April 10, 2018 at 3:45 PM, with the laboratory manager, confirmed the laboratory was not enrolled in a CMS-approved PT program since the last survey.</p>
D5217	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1)</p> <p>At least twice annually, the laboratory must verify the accuracy of any test or procedure it performs that is not included in subpart I of this part.</p> <p>This STANDARD is not met as evidenced by: Based on a record review and an interview with the laboratory manager, the</p>

laboratory failed to verify the accuracy of estimated sedimentation rate (ESR) at least twice annually since the last survey on July 11, 2016. Findings: 1. A record review revealed the laboratory failed to document the accuracy of ESR at least twice annually since the last survey. 2. An interview on April 10, 2018 at 4:20 PM, with the laboratory manager, confirmed the laboratory failed to document the accuracy of ESR at least twice annually.

D5801

TEST REPORT
CFR(s): 493.1291(a)

The laboratory must have an adequate manual or electronic system(s) in place to ensure test results and other patient-specific data are accurately and reliably sent from the point of data entry (whether interfaced or entered manually) to final report destination, in a timely manner. This includes the following: (a)(1) Results reported from calculated data. (a)(2) Results and patient-specific data electronically reported to network or interfaced systems. (a)(3) Manually transcribed or electronically transmitted results and patient-specific information reported directly or upon receipt from outside referral laboratories, satellite or point-of-care testing locations.

This STANDARD is not met as evidenced by:
Based on a record review and an interview with the laboratory manager, the laboratory failed to verify the accuracy and correct the test results entered manually for a patient reviewed on March 28, 2018. Findings: 1. A review of a patient record from March 28, 2018, revealed the laboratory had reported an albumin result of 3 and a total bilirubin result of 90.6. A review of the Vitros 350 chemistry analyzer printouts for the patient revealed an albumin of 3.6 and a total bilirubin result of 0.6. 2. An interview on April 10, 2018 at 4:30 PM, with the laboratory manager, confirmed the laboratory failed to verify the accuracy of patient test results entered into the patient's electronic medical record.