

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 13D2047419	(X3) Date Survey Completed 12/09/2021
Name of Provider or Supplier Raise The Bottom	Street Address, City, State 9196 W Barnes St, Boise, 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
D2003	<p>ENROLLMENT CFR(s): 493.801(a)(2)(ii)</p> <p>For those tests performed by the laboratory that are not included in subpart I of this part, a laboratory must establish and maintain the accuracy of its testing procedures, in accordance with 493.1236(c)(1)</p> <p>This STANDARD is not met as evidenced by: Based on a review of proficiency testing (PT) records from the College of American Pathologists (CAP), the laboratory test menu and an interview with the technical supervisor (TS) on 12/9/2021, the laboratory failed to verify the accuracy for all confirmatory toxicology analytes listed on the test menu. The findings include: 1. A review of proficiency testing records from CAP and the laboratory test menu identified that the laboratory failed at least twice annually verify the accuracy for the analytes: Carfentanil, Mitragynine, Aminoclonazepam, Aminoflunitrazepam, Clonazepam, Diazepam, Flunitrazepam, Flurazepam, Hydroxyethylflurazepam, Norhydrocodone, Noroxycodone, Meperidine, Normeperidine, Sufentanil, Tramadol, Imipramine, Ketamine, Naloxone, Norketamine and Zolpidem for 2020 and 2021. 2. An interview with the TS on 12/9/2021 at 10:05 am confirmed that the laboratory failed to verify the accuracy for all confirmatory toxicology analytes for 2020 and 2021. 3. The laboratory reports performing 30,000 toxicology tests annually.</p>