Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 14D0435278	(X3) Date Survey Completed 10/03/2022
Name of Provider or Supplier Hshs Good Shepherd Hospital Laboratory	**Street Address, City, State** 200 S Cedar St, Shelbyville, IL	

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
D2016	SUCCESSFUL PARTICIPATION CFR(s): 493.803(a)(b)(c) (a) Each laboratory performing nonwaived testing must successfully participate in a proficiency testing program approved by CMS, if applicable, as described in subpart I of this part for each specialty, subspecialty, and analyte or test in which the laboratory is certified under CLIA. (b) Except as specified in paragraph (c) of this section, if a laboratory fails to participate successfully in proficiency testing for a given specialty, subspecialty, analyte or test, as defined in this section, or fails to take remedial action when an individual fails gynecologic cytology, CMS imposes sanctions, as specified in subpart R of this part. (c) If a laboratory fails to perform successfully in a CMS-approved proficiency testing program, for the initial unsuccessful performance, CMS may direct the laboratory to undertake training of its personnel or to obtain technical assistance, or both, rather than imposing alternative or principle sanctions except when one or more of the following conditions exists: (1) There is immediate jeopardy to patient health and safety. (2) The laboratory fails to provide CMS or a CMS agent with satisfactory evidence that it has taken steps to correct the problem identified by the unsuccessful proficiency testing performance. (3) The laboratory has a poor compliance history. This CONDITION is not met as evidenced by: Based on review of the CASPER Report 0155D and review of American Proficiency Institute (API) records the laboratory failed to successfully participate in proficiency testing (PT) for the immunohematology analyte compatibility testing during events one and two of 2022. See D2181.
D2181	COMPATIBILITY TESTING CFR(s): 493.863(e) Failure to achieve an overall testing event score of satisfactory for two consecutive

	testing events or two out of three consecutive testing events is unsuccessful performance. This STANDARD is not met as evidenced by: Based on review of CASPER Report 0155D and review of American Proficiency Institute (API) records the laboratory failed to successfully participate in proficiency testing (PT) for the immunohematology analyte compatibility testing during events one and two of 2022. Findings include: 1. Review of the CASPER Report 0155D ran on 10-3-2022 identified the initial unsuccessful PT performance for the specialty of immunohematology for compatibility testing. IMMUNOHEMATOLOGY Compatibility Testing - EVENT-1, 2022 = 80% - Unsatisfactory Compatibility Testing - EVENT-2, 2022 = 80% - Unsatisfactory 2. Review of API PT records confirmed the unsuccessful PT performance for compatibility testing during events one and two of 2022.