

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  16D0385140	<b>(X3) Date Survey Completed</b>  08/22/2024
<b>Name of Provider or Supplier</b>  Orange City Municipal Hospital	<b>Street Address, City, State</b>  1000 Lincoln Circle Se, Orange City, IA	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D3031</b>	<p><b>RETENTION REQUIREMENTS</b> CFR(s): 493.1105(a)(3)</p> <p>Analytic systems records. Retain quality control and patient test records (including instrument printouts, if applicable) and records documenting all analytic systems activities specified in 493.1252 through 493.1289 for at least 2 years.</p> <p>This STANDARD is not met as evidenced by: Based on lack of D-dimer calibration records, review of coagulation records and confirmed by laboratory personnel identifier #1 (refer to the Laboratory Personnel Report) at 1:31 pm on 8/22/2024, the laboratory failed to retain the D-dimer calibration records for one out of three calibrations performed from 1/1/2023 - 8/22/2024. The findings include: 1. The laboratory performed D-dimer calibrations on the following dates: 2/16/2023, 10/3/2023 and 4/24/2024. 2. At the time of the survey, the laboratory did not retain the D-dimer calibration records from 10/3/2023.</p>