

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  17D0450748	<b>(X3) Date Survey Completed</b>  12/07/2021
<b>Name of Provider or Supplier</b>  Morris County Hospital	<b>Street Address, City, State</b>  600 North Washington, Council Grove, KS	
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>D5401</b>	<p>PROCEDURE MANUAL CFR(s): 493.1251(a)</p> <p>A written procedures manual for all tests, assays, and examinations performed by the laboratory must be available to, and followed by, laboratory personnel. Textbooks may supplement but not replace the laboratory's written procedures for testing or examining specimens.</p> <p>This STANDARD is not met as evidenced by: Based on the review of the transfusion/blood bank log, "Compatibility lookback for patients with current or history of antibodies" and interview with the technical consultant #1 (TC #1), the laboratory failed to follow procedure of peer review and document patients with a history atypical antibodies in immunohematology (blood bank). Findings: 1. Procedure states "Peer reviewing tech will date, time and initial upon lookback completion." 2. The transfusion/blood bank logs of August 2021, September 2021, October 2021, November 2021 and up to December 7, 2021 contained no documentation of a peer review for a history of antibodies at the time of survey. 3. During the review of the transfusion/blood bank logs there were 40 of 40 patients during four of four months with no documented peer review of a history of antibodies at the time of survey. 4. Interview with the TC #1 on December 7, 2021 at 1:00 p.m. confirmed the laboratory failed laboratory failed to follow procedure of peer review and document patients with a history of atypical antibodies in immunohematology (blood bank) on 40 of 40 patients for four of four months.</p>
<b>D5417</b>	<p>TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(d)</p> <p>Reagents, solutions, culture media, control materials, calibration materials, and other supplies must not be used when they have exceeded their expiration date, have deteriorated, or are of substandard quality.</p>

This STANDARD is not met as evidenced by:

Based on observation and interview with the technical consultant #1 (TC #1), the laboratory failed to ensure that four different expired vacutainer/microtainer specimen tubes were not available for use in patient specimen collection. Findings: 1.

Observation of the specimen collection area of the laboratory showed four different expired vacutainer/microtainer specimen tubes were available for use, mixed with in-date vacutainer/microtainer specimen tubes at the time of survey. 2. The four different expired vacutainer/microtainer tubes found at the time of survey were: a. Becton Dickinson (BD) EDTA 250 to 500L Microtainer, expired March 31, 2021 b. BD Sodium Citrate (Na Citrate) 2.7mL specimen tube, expired July 31, 2021 c. BD K2 EDTA 4mL specimen tube, expired September 30, 2021 d. BD Serum Separation Tube (SST) 8.5mL, expired March 31, 2021 3. Interview with the TC #1 on December 7, 2021 at 10:00 a.m. confirmed, the laboratory failed to ensure that four different expired vacutainer/microtainer specimen tubes were not available for use in patient specimen collection.