

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  17D0452770	<b>(X3) Date Survey Completed</b>  10/30/2018
<b>Name of Provider or Supplier</b>  Edwards County Medical Center	<b>Street Address, City, State</b>  620 West 8th Street, Kinsley, 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>D5445</b>	<p><b>CONTROL PROCEDURES</b> CFR(s): 493.1256(d)(1)(2)(g)</p> <p>Unless CMS Approves a procedure, specified in Appendix C of the State Operations Manual (CMS Pub. 7), that provides equivalent quality testing, the laboratory must-- (d)(1) Perform control procedures as defined in this section unless otherwise specified in the additional specialty and subspecialty requirements at 493.1261 through 493.1278. (d)(2) For each test system, perform control procedures using the number and frequency specified by the manufacturer or established by the laboratory when they meet or exceed the requirements in paragraph (d)(3) of this section. (g) The laboratory must document all control procedures performed.</p> <p>This STANDARD is not met as evidenced by: Based on review with the General Supervisor and the review of package inserts and patient test logs, the laboratory failed to perform external quality control (QC) for moderate complexity testing SERUM HCG and C-DIFF testing each day of patient testing. 1. Review of the patient logs showed external QC was not performed each day of patient testing 20 out of 20 days for C-DIFF and 10 out of 10 different days reviewed for SERUM HCG. 2. No IQCP has been completed to allow the lab to reduce the frequency for QC for SERUM HCG and C-DIFF which requires QC for Moderate Complexity to be performed each day of patient testing. The interview occurred on 10/30/2018 @ 1145.</p>