

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 24D0405291	(X3) Date Survey Completed 11/13/2025
Name of Provider or Supplier Pipestone County Medical Center Laboratory	Street Address, City, State 916 4th Ave Sw, Pipestone, MN	
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
D0000	The Pipestone County Medical Center laboratory was found to be out of compliance with the regulations of the Clinical Laboratory Improvement Amendments of 1988 (42 C.F.R. part 493) upon completion of the proficiency testing desk review survey performed on November 13, 2025. The following condition-level deficiencies were cited: 493.803 Successful Participation The following standard-level deficiencies were cited: 493.841 Routine chemistry .
D2016	<p>SUCCESSFUL PARTICIPATION CFR(s): 493.803(a)(b)(c)</p> <p>(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.</p> <p>This CONDITION is not met as evidenced by: . Based on review of proficiency testing (PT) reports from the Center for Medicare and Medicaid Services (CMS) and the American Proficiency Institute (API), the</p>

laboratory failed to successfully participate in Creatine Kinase (CK) PT under specialty of Routine Chemistry in 2025. Findings are as follows: 1. The CMS CASPER Report 0155D and the API 2025 Chemistry Core - 2nd and 3rd Event Performance Summary and Comparative Evaluations were reviewed on November 13, 2025. 2. The reports indicated the laboratory failed to achieve satisfactory performance for Creatine Kinase in two of three consecutive testing events in 2025, resulting in unsuccessful performance of the analyte. See D2096. .

D2096

ROUTINE CHEMISTRY

CFR(s): 493.841(f)

(f) Failure to achieve satisfactory performance for the same analyte or test in 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 proficiency testing (PT) reports from American Proficiency Institute (API), the laboratory failed to achieve satisfactory performance for Creatine Kinase (CK) PT testing in two of three consecutive testing events in 2025, constituting unsuccessful performance. Findings are as follows: 1. The API 2025 Chemistry - Core 2nd and 3rd Performance Summary and Comparative Evaluations were reviewed on November 13, 2025. The API reports indicated the laboratory had unsatisfactory performance for CK. See below. 2nd Event 2025 60% 3rd Event 2025 40% .