

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 25D0316753	(X3) Date Survey Completed 12/04/2025
Name of Provider or Supplier Delta Health System - The Medical Center	Street Address, City, State 1400 East Union St - Laboratory, Greenville, MS	
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
D5203	<p>SPECIMEN IDENTIFICATION AND INTEGRITY CFR(s): 493.1232</p> <p>The laboratory must establish and follow written policies and procedures that ensure positive identification and optimum integrity of a patient's specimen from the time of collection or receipt of the specimen through completion of testing and reporting of results.</p> <p>This STANDARD is not met as evidenced by: Based on surveyor observation of an unlabeled ABG (arterial blood gas) sample, interview with testing personnel (TP) #5 and Respiratory Dept Supervisor as listed on the Centers for Medicaid and Medicare Services (CMS) 209 form and review of the Respiratory Arterial labeling policy, the laboratory failed to follow their policy to ensure positive identification for one of one patient specimen from the time of collection through testing and reporting for ABG results. Findings include: 1. On 12/4/2025 the surveyor observed TP #5 entering the ER respiratory lab with an unlabeled syringe (one of one) in a plastic bag and no blood gas patient orders or documentation. When asked to explain the process of testing the blood gas sample as she was entering information in the Gem Premier 4000, she exited the ER Respiratory lab to retrieve the patient's label leaving the unlabeled syringe on the counter. She returned moments later with a label and affixed it to the syringe. She entered the patient demographics in the Gem Premier and tested the blood gas patient sample. 2. Interview with TP #5 on 12/4/2025 at 10:30 a.m., revealed that orders are received for the providers through their LIS/computer system and labels are received from the nurses' station prior to entering the patient's room to draw the blood gas sample. After testing they revealed the blood results are manually entered into the LIS system if they don't interface over automatically. A copy of results is given to the provider, and a copy is retained in the Respiratory Department and used to enter into the LIS. 2. Interview with the Respiratory Department Supervisor 12/4/2025 at 11:30 a.m., revealed that the policy is supposed to be followed where after the orders are received, labels retrieved from</p>

the nurses' station, the sample is labeled at bedside after the blood gas is collected and brought to the lab to be tested. The supervisor also added that the staff were trained to scan the barcode on the patient's label before testing on the Gem Premier. Manually demographic information is only entered in the Gem Premier in certain situations. 3. The Respiratory Department has 2 blood gas collection policies which include the labeling policy: a. In the Arterial Line Blood Sampling, RT. 1108 procedure it states on #23 "Place label (patient identifier) on syringe and place syringe in the biohazard bag." b. In the Capillary Blood Gas Sampling, RT. 1109 procedure it states on #14 "Label the sample and place in biohazard bag." In both procedures "Syringe label (patient identification)" is listed as "necessary equipment" to be obtained and is a part of the blood gas kit to have when entering the patient's room to collect blood gases.