Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	26D0439378	05/15/2025
Name of Provider or Supplier	**Street Address, City, State**	
St Louis Cancer Care	10004 Kennerly Rd Ste 137a, Saint Louis, MO	

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
D2016	SUCCESSFUL PARTICIPATION CFR(s): 493.803(a)(b)(c) (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. This CONDITION is not met as evidenced by: Based on a desk review of proficiency testing (PT) records from the Certification and Survey Provider Enhanced Reporting (CASPER) 0155 report and review of AAB Medical Laboratory Evaluation (AAB) 2024 and 2025 proficiency records, the laboratory failed to successfully participate in a proficiency testing program approved by HHS, for each specialty, subspecialty, and analyte or test in which the laboratory is certified under CLIA. The laboratory failed to successfully participate in the specialty of hematology for the analytes red blood cell (RBC) and hemoglobin. Refer to D2130.
D2130	HEMATOLOGY

	CFR(s): 493.851(f) (f) Failure to achieve satisfactory performance for the same analyte in two consecutive events or two out of three consecutive testing events is unsuccessful performance. This STANDARD is not met as evidenced by: Based on a desk review of proficiency testing (PT) records from the Certification and Survey Provider Enhanced Reporting (CASPER) 0155 report, review of AAB Medical Laboratory Evaluation (AAB) 2024 and 2025 proficiency records and email correspondence with testing personnel #2 on May 5, 2025, at 3:52 PM, the laboratory failed to achieve satisfactory performance for the same analytes for two out of three consecutive testing events in the specialty of hematology for the analytes red blood cell (RBC), and hemoglobin. Findings: 1. Review of the CASPER 0155 report showed the following results: Hematology 2024-2nd event the laboratory received an unsatisfactory score of 0 percent for red blood cell (RBC). Hematology 2024-2nd event the laboratory received an unsatisfactory score of 0 percent for hemoglobin. Hematology 2025-1st event the laboratory received an unsatisfactory score of 60 percent for red blood cell (RBC). Hematology 2025-1st event the laboratory received an unsatisfactory score of 60 percent for hemoglobin. 2. Review of the AAB Medical Laboratory Evaluation (AAB) 2024 and 2025 proficiency records confirmed the CASPER 0155 report results. 3. Email correspondence with testing personnel #2 on May 5, 2025, at 3:52 PM confirmed the laboratory failed to achieve satisfactory performance for red blood cell and hemoglobin in two out of three consecutive testing events.