Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	26D0697647	06/20/2022
Name of Provider or Supplier	**Street Address, City, State**	
Puxico Medical Clinic	130 E Harbin, Puxico, 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
D6019	LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1407(e)(4)(iv) The laboratory director is responsible for the overall operation and administration of the laboratory, including the employment of personnel who are competent to perform test procedures, and record and report test results promptly, accurate, and proficiently and for assuring compliance with the applicable regulations. (e) The laboratory director must-- (e)(4)(iv) Ensure that an approved corrective action plan is followed when any proficiency testing results are found to be unacceptable or unsatisfactory. This STANDARD is not met as evidenced by: Based on review of the 2021 proficiency testing (PT) records, lack of an approved corrective action plan for PT results and interview with the technical consultant (TC), the laboratory director failed to ensure an approved corrective action plan is followed when any PT result is found to be unacceptable or unsatisfactory. Findings: 1. Review of 2021 hematology/coagulation- third event PT records showed the laboratory obtained an unacceptable result for specimens: Urine sediment -specimen US-2 Mean corpuscular hemoglobin (MCH)- specimen HSY-15 2. No corrective action documentation was available to show the laboratory investigated the unacceptable PT results. 3. Interview with the TC on June 8, 2022 at 9:30 AM confirmed the laboratory director failed to ensure an approved corrective action plan is followed when any proficiency testing result is found to be unacceptable or unsatisfactory.