Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 27D0410720	(X3) Date Survey Completed 10/23/2023
Name of Provider or Supplier Deer Lodge Medical Center	**Street Address, City, State** 1100 Hollenback Lane, Deer Lodge, MT	

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 routine desk audit of the CMS-155 report for proficiency testing (PT) performance, a review of College of American Pathology (CAP) records and interview with the technical supervisor (TS) #1, the laboratory failed to achieve satisfactory performance for prothrombin time performed on the Xprecia Stride Coagulation Analyzer for two consecutive testing events, resulting in unsuccessful proficiency testing performance. (See D2130)
D2130	HEMATOLOGY CFR(s): 493.851(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 review of College of American Pathology (CAP) proficiency testing (PT) scores and interview with technical supervisor (TS) #1, the laboratory failed to achieve a score of at least 80% for two consecutive testing events (2023 WP9-B and WP9-C) for prothrombin time performed on the Xprecia Stride Coagulation Analyzer. Findings: 1. A review of the CAP total prothrombin time proficiency testing scores revealed that in year 2023, WP9-B scored 0% and WP9-C scored 0%. 2. An interview with TS #1 on October 23, 2023, at 12:31 PM confirmed the laboratory's failed prothrombin time proficiency scores for 2023 WP9-B and WP9-C were due to the lack of submitting an appropriate response to CAP.