

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 28D0455865	<b>(X3) Date Survey Completed</b> 03/25/2022
<b>Name of Provider or Supplier</b> Jennie M Melham Memorial Medical Center	<b>Street Address, City, State</b> 145 Memorial Drive, Broken Bow, NE	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D2016</b>	<p><b>SUCCESSFUL PARTICIPATION</b> 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 surveyor off-site desk review of the laboratory's 2021 American Proficiency Institute (API) proficiency testing (PT) records and a telephone interview with the laboratory manager on 3/25/2022, it was determined the laboratory failed to successfully participate in proficiency testing for the analyte compatibility testing. Refer to D2181.</p>
<b>D2181</b>	<p><b>COMPATIBILITY TESTING</b> CFR(s): 493.863(e)</p>

Failure to achieve an overall testing event score of satisfactory for 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 surveyor off-site desk review of the laboratory's 2021 American Proficiency Institute (API) proficiency testing (PT) records and a telephone interview with the laboratory manager on 3/25/2022, it was determined the laboratory failed to achieve successful performance for the analyte, compatibility testing, in two out of three testing events. Findings: 1. Desk review of the laboratory's 2021 API PT records revealed Compatibility Testing scores of less than one hundred percent for the following Immunohematology events: 2021 first event, score 80% 2021 third event, score 80% 2. In a telephone interview with the laboratory manager on 3/25/2022, it was confirmed that the laboratory was unsuccessful in the PT events listed above.