

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 28D0456160	(X3) Date Survey Completed 04/16/2025
Name of Provider or Supplier Phelps Memorial Health Center	Street Address, City, State 1215 Tibbals Street, Holdrege, NE	
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
D5775	<p>COMPARISON OF TEST RESULTS CFR(s): 493.1281(a)(c)</p> <p>(a) If a laboratory performs the same test using different methodologies or instruments, or performs the same test at multiple testing sites, the laboratory must have a system that twice a year evaluates and defines the relationship between test results using the different methodologies, instruments, or testing sites.</p> <p>This STANDARD is not met as evidenced by: Based on review of the laboratory's list of tests performed, lack of documentation, and interview with the laboratory manager the laboratory failed to have a system that twice annually evaluated the relationship between test results using different methodologies for troponin and creatinine since July 2023. Findings are: 1. Review of the laboratory's list of tests performed revealed the laboratory was performing troponin and creatinine testing on the Vitros XT 7600 and on the iSTAT. 2. Review of documentation presented at time of survey revealed the laboratory performed a method comparison of troponin and creatinine on July 2023. 3. Interview with the laboratory manager on 4/15/2025 at 3:32 PM, confirmed patient testing was being performed in 2024 and 2025 using both methods, but the last evaluation of test methodologies for troponin and creatinine was performed on July 2023.</p>
D6054	<p>TECHNICAL CONSULTANT RESPONSIBILITIES CFR(s): 493.1413(b)(9)</p> <p>(b)(9) Thereafter, evaluations must be performed at least annually</p> <p>This STANDARD is not met as evidenced by: Based on surveyor review of the CMS-209 testing personnel report, review of competencies, and interview with the laboratory manager the technical consultant</p>

failed to perform 2023 and 2024 annual competencies on two out of two testing personnel performing moderate complexity testing. Findings are: 1. Review of the CMS-209 laboratory personnel report revealed two testing personnel performing moderate complexity testing. 2. Review of annual competencies presented at time of survey revealed moderate complexity testing personnel #1 and #2, as listed on the CMS-209, did not have 2023 and 2024 annual competencies performed. 3. Interview with the laboratory manager on 4/15/2025 at 4:35 PM, confirmed moderate complexity testing personnel #1 and #2 did not have 2023 and 2024 annual competencies performed.