

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 28D0456252	<b>(X3) Date Survey Completed</b> 01/28/2026
<b>Name of Provider or Supplier</b> Chase County Community Hospital	<b>Street Address, City, State</b> 600 West 12th Street, Imperial, 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>D5445</b>	<p><b>CONTROL PROCEDURES</b> CFR(s): 493.1256(d)(1)(2)(g)</p> <p>(d) Unless CMS Approves a procedure, specified in Appendix C of the State Operations Manual (CMS Pub. 7), that provides equivalent quality testing, the laboratory must-- (d)(1) Perform control procedures as defined in this section unless otherwise specified in the additional specialty and subspecialty requirements at 493.1261 through 493.1278. (d)(2) For each test system, perform control procedures using the number and frequency specified by the manufacturer or established by the laboratory when they meet or exceed the requirements in paragraph (d)(3) of this section. (d)(3) At least once each day patient specimens are assayed or examined perform the following for:</p> <p>This STANDARD is not met as evidenced by: Based on surveyor review of quality control records, lack of Individualized Quality Control Plan (IQCP), interview with the laboratory manager, and email from the laboratory manager, the laboratory failed to performed quality control (QC) each day of patient testing lactoferrin, using the Techlab Leuko EZ Vue, from 1/20/2025 - 12/1/2025. Findings: 1. Review of Techlab Leuko EZ Vue QC records from 1/20/2025 - 12/1/2025, revealed QC was performed on 10/8/2025. 2. Interview with the laboratory manager on 1/27/2026 at 10:28 AM confirmed the laboratory did not have an IQCP in place for lactoferrin, using the Techlab Leuko EZ Vue. 3. Interview with the laboratory manager on 1/27/2026 at 10:28 AM confirmed the laboratory did not perform QC each day of patient testing from 1/20/2025 - 12/1/2025. 4. Email from the laboratory manager received on 1/28/2026, confirmed the laboratory tested 9 patients for lactoferrin, using the Techlab Leuko EZ Vue in 2025.</p>
<b>D6106</b>	<p><b>LABORATORY DIRECTOR RESPONSIBILITIES</b> CFR(s): 493.1445(e)(14)</p>

(e)(14) Ensure that an approved procedure manual is available to all personnel responsible for any aspect of the testing process; and

This STANDARD is not met as evidenced by:

Based on observation, review of the laboratory's blood bank procedure manual, and interview with the laboratory director the laboratory failed to have "Transfusion Reaction Protocol" signed by the laboratory director at time of survey. Findings: 1. Interview with the laboratory director on 1/28/2026 at 10:10 AM, confirmed the laboratory did not have "Transfusion Reaction Protocol" signed at time of survey.