

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 28D0652580	(X3) Date Survey Completed 01/23/2024
Name of Provider or Supplier Carl T Curtis Health Center	Street Address, City, State 100 Indian Hills Drive, Macy, 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
D5449	<p>CONTROL PROCEDURES CFR(s): 493.1256(d)(3)(ii)(g)</p> <p>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-- At least once a day patient specimens are assayed or examined perform the following for-- Each qualitative procedure, include a negative and positive control material; (g) The laboratory must document all control procedures performed.</p> <p>This STANDARD is not met as evidenced by: Based on surveyor review of quality control records, patient testing records, and interview with the technical consultant, on 1/23/2024 at 12:08 PM, the laboratory failed to perform quality control (QC) each day of patient testing for 107 out of 119 days of chlamydia/gonorrhea testing from 3/20/2023 - 1/23/2024. Findings are: 1. Review of QC records from 3/20/2023 - 1/23/2024 for chlamydia/gonorrhea revealed QC testing was performed on 4/5/2023, 4/28/2023, 5/1/2023, 6/14/2023, 7/12/2023, 7/25/2023, 8/10/2023, 9/1/2023, 10/26/2023, 11/2/2023, 12/6/2023, and 1/11/2024. 2. Review of patient testing records for chlamydia/gonorrhea, from 3/20/2023 - 1/23/2024, revealed 123 patients were tested for chlamydia/gonorrhea from 3/20/2023 - 1/23/2024. 3. Interview with the technical consultants confirmed the laboratory did not perform quality control each day of patient testing for chlamydia/gonorrhea.</p>