

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 28D0978775	<b>(X3) Date Survey Completed</b> 02/21/2019
<b>Name of Provider or Supplier</b> Capital Medical Clinic, Llp	<b>Street Address, City, State</b> 4701 Normal Blvd, Lincoln, 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>D2009</b>	<p><b>TESTING OF PROFICIENCY TESTING SAMPLES</b> CFR(s): 493.801(b)(1)</p> <p>The individual testing or examining the samples and the laboratory director must attest to the routine integration of the samples into the patient workload using the laboratory's routine methods.</p> <p>This STANDARD is not met as evidenced by: Based on review of proficiency testing attestation statements and an interview with testing personnel at 10:45 AM on 2/22/2019, the laboratory failed to attest to the routine integration of sample into the patient workload using the laboratory's routine methods. Findings are: 1. Review of 2017 and 2018 proficiency testing attestation statements revealed no signature from the laboratory director on 2017 event B chemistry and 2018 event C chemistry. 2. Interview with the testing personnel confirmed the absence of laboratory director's signature.</p>
<b>D6018</b>	<p><b>LABORATORY DIRECTOR RESPONSIBILITIES</b> CFR(s): 493.1407(e)(4)(iii)</p> <p>The laboratory director is responsible for the overall operation and administration of the laboratory, including the employment of personnel who are competent to perform test procedures, and record and report test results promptly, accurate, and proficiently and for assuring compliance with the applicable regulations. (e) The laboratory director must-- (e)(4)(iii) Ensure that all proficiency testing reports received are reviewed by the appropriate staff to evaluate the laboratory's performance and to identify any problems that require corrective action;</p> <p>This STANDARD is not met as evidenced by: Based on document review and interview with testing personnel on 2/21/2019 at 10:</p>

	<p>45AM no corrective action was performed or documented on failed urine microscopy proficiency testing. Findings are: 1. No corrective action was performed or documented on the following urine microscopy proficiency testing: 2017 event A - 1 out of 3 failed, 2017 event C - 1 out of 3 failed and 2018 event A - 1 out of 3 failed. 2. Interview with testing personnel confirmed no corrective action was performed.</p>
<b>D6033</b>	<p><b>TECHNICAL CONSULTANT-MODERATE COMPEXITY</b> CFR(s): 493.1409</p> <p>The laboratory must have a technical consultant who meets the qualification requirements of 493.1411 of this subpart and provides technical oversight in accordance with 493.1413 of this subpart.</p> <p>This CONDITION is not met as evidenced by: Based on lack of documentation on CMS 209 and interview with testing personnel on 2/21/2019 at 10:00 AM the laboratory did not have the technical consultant position filled. 1. CMS-209 form did not have the technical consultant position filled. 2. Interview with testing personnel confirmed that the last time they had a technical consultant was on August 2018.</p>
<b>D6054</b>	<p><b>TECHNICAL CONSULTANT RESPONSIBILITIES</b> CFR(s): 493.1413(b)(9)</p> <p>The technical consultant is responsible for evaluating and documenting the performance of individuals responsible for moderate complexity testing at least annually, after the first year.</p> <p>This STANDARD is not met as evidenced by: Based on review of the CMS-209 testing personnel report and interview with testing personnel at 10:00 AM on 2/21/2019, revealed the 2018 annual competencies on testing personnel performing moderate complex testing was performed by testing personnel, whom were not qualified as a technical consultant. Findings are: 1. Review of the CMS 209 Laboratory Personnel Report revealed two testing personnel performing moderate complexity testing at this facility. 2. Interview with testing personnel confirmed 2018 annual competency was not performed by a technical consultant.</p>