Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	29D0663011	08/12/2024
Name of Provider or Supplier	**Street Address, City, State**	
Grover C Dils Medical Center	700 N Spring Street, Caliente, NV	

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
D0000	This Statement of Deficiencies was created as a result of an on-site CLIA recertification survey conducted at your facility on August 12, 2024. The findings and conclusions of any investigation by the Division of Public and Behavioral Health shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.
D5215	EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(b)(2) The laboratory must verify the accuracy of any analyte, specialty or subspecialty assigned a proficiency testing score that does not reflect laboratory test performance (that is, when the proficiency testing program does not obtain the agreement required for scoring as specified in subpart I of this part, or the laboratory receives a zero score for nonparticipation, or late return or results). This STANDARD is not met as evidenced by: Based on a review of the 2022 and 2023 American Proficiency Institute (API) Proficiency Testing (PT) records for Hematology and Coagulation, and an interview with general supervisor number one listed on the CMS-209 form, the laboratory failed to ensure that the ungraded educational challenges for the Blood Cell Identification and the ungraded vaginal wet preparation results were reviewed, and documented. Findings include: 1. A review of the 2022 API PT Hematology/Coagulation test event two report revealed that the laboratory failed to review and document the ungraded educational blood identification, and platelet estimate for sample DIF-02. The reported result for Neutrophil, segmented or band was 1%. The expected result was 41-71%. The reported result for the Platelet Estimate was increased. The expected result was Adequate/Normal. 2. A review of the 2022 API PT Hematology /Coagulation test event two report revealed that the laboratory failed to review and document the ungraded Vaginal Wet Preparation result for sample VA-02. The

	reported result was Trichomonas seen. The expected result stated to review the data summary. There was no documentation of a review of the data summary. 3. A review of the 2023 API PT Hematology/Coagulation test event one report revealed that the laboratory failed to review and document the ungraded educational blood identification for sample DIF-01. The reported result for Immature Cell was 29%. The expected result was 57-100%. The reported result for Lymphocyte was 49%. The expected result was 0-16%. The reported result for Unclassifed Cell was 3%. The expected result was 0-2%. 4. A review of the 2023 API PT Hematology/Coagulation test event one report revealed that the laboratory failed to review and document the ungraded educational blood identification for sample DIF-01. The reported result for Immature Cell was 29%. The expected result was 57-100%. The reported result for Lymphocyte was 49%. The expected result was 0-16%. The reported result for Unclassifed Cell was 3%. The expected result was 0-2%. 5. A review of the 2023 API PT Hematology/Coagulation test event two report revealed that the laboratory failed to review and document the ungraded platelet estimate for sample DIF-02. The reported result for the platelet estimate was increased. The expected result was Adequate/Normal. 6. The findings were confirmed during an interview with general supervisor number one listed on the CMS-209 form conducted on August 12, 2024 at approximately 4:30 PM. The laboratory performs approximately 4503 hematology tests and 321 microbiology tests annually.
D5217	EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1) At least twice annually, the laboratory must verify the accuracy of any test or procedure it performs that is not included in subpart I of this part. This STANDARD is not met as evidenced by: Based on a review of the 2022 American Proficiency Institute (API) Proficiency Testing (PT) records for miscellaneous chemistry, and an interview with general supervisor number one listed on the CMS-209 form, the laboratory failed to verify the accuracy urine benzodiazepine and methadone twice annually during 2022. Findings include: 1. A review of the 2022 API PT records for miscellaneous revealed that the laboratory obtained a score of 67% for Methadone during the first test event of 2022. The laboratory obtained a score of 67% for Benzodiazepines during the second test event of 2022. 2. The findings were confirmed during an interview with general supervisor number one listed on the CMS-209 form conducted on August 12, 2024 at approximately 4:30 PM. The laboratory performs approximately 5835 chemistry tests annually.
D5411	TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(a) Test systems must be selected by the laboratory. The testing must be performed following the manufacturer's instructions and in a manner that provides test results within the laboratory's stated performance specifications for each test system as determined under 493.1253. This STANDARD is not met as evidenced by: Based on a review of the manufacturer's package insert, observation of the Sysmex CA-600 programming for the INR calculation, and and interview with General

	Supervisor numbers one and two on the CMS-209 form, the laboratory failed to ensure that the ISI was updated in the instrument when the current lot number of Dade Innovin reagent was placed in use for the Prothrombin Time (Protime) test. Findings include: 1. A review of the Dade Innovin package insert revealed that the ISI value for lot number 564657 for use on the Sysmex CA-600 coagulation instrument was 1.08. 2. Observation of the current programming in the Sysmex CA-600 analyzer revealed that the ISI in the instrument was 1.04. 3. The findings were confirmed during an interview with the General Supervisor numbers one and two conducted on August 12, 2024 at approximately 4:30 PM. The laboratory performs approximately 4503 hematology tests annually.