

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 29D0968817	(X3) Date Survey Completed 04/28/2022
Name of Provider or Supplier Las Vegas-Amg Specialty Hospital Llc	Street Address, City, State 4015 S Mcleod Dr, Las Vegas, 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 April 28, 2022. 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.
D5221	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(d)</p> <p>All proficiency testing evaluation and verification activities must be documented.</p> <p>This STANDARD is not met as evidenced by: Based on a review of the 2021 American Proficiency Institute (API) Proficiency Testing (PT) Chemistry Core test event one records, a review of the director approved policy and procedure entitled, "Proficiency Testing," and an interview with the laboratory manager, the laboratory failed to ensure that corrective action was taken and documented for all unacceptable results. Findings include: 1. A review of the 2021 API proficiency testing records for the Chemistry Core test event one revealed that the laboratory failed to perform and document corrective action for the unacceptable sodium result for specimen number BG-03. The laboratory reported a sodium result of 112 mmol/L. The sodium acceptable range for specimen BG-03 was 115-124 mmol/L. 2. The director approved policy and procedure entitled, "Proficiency Testing" stated "ny (sic) samples that fall out of range will be investigated and corrective action will occur in a timely manner." 3. The findings were confirmed during an interview with the laboratory manager conducted on April 28, 2022 at approximately 11:00 AM. The laboratory performs approximately 1000 chemistry tests and 500 hematology tests annually.</p>
D6029	LABORATORY DIRECTOR RESPONSIBILITIES

CFR(s): 493.1407(e)(11)

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)(11) Ensure that prior to testing patients' specimens, all personnel have the appropriate education and experience, receive the appropriate training for the type and complexity of the services offered, and have demonstrated that they can perform all testing operations reliably to provide and report accurate results.

This STANDARD is not met as evidenced by:

Based on a review of the laboratory records for training and competency assessment, the director approved policy and procedure entitled, "ABG Quality Assessment," and an interview with the laboratory manager, the director failed to ensure that personnel completed initial training and competency assessment prior to performing testing. Findings include: 1. A review of the 2020-2022 training and competency assessment records for arterial blood gas testing revealed that there was no documentation of initial training and competency assessment for four of six testing personnel prior to the performance of arterial blood gas testing on patient samples. 2. The director approved policy and procedure entitled, " ABG Quality Assessment," in section 1, entitled, "Pre-Analytic Assessment" in step h, stated, "The RT staff will be training initially, and at 6 months and yearly thereafter. This training will be recorded on competency forms that outline all the areas of training that were covered by the staff." 3. The findings were confirmed during an interview with the laboratory manager on April 28, 2022 at approximately 12:00 PM. The laboratory performs approximately 1000 chemistry tests and 500 hematology tests annually.