

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 29D2135892	(X3) Date Survey Completed 04/24/2019
Name of Provider or Supplier Psychiatric Management Llc	Street Address, City, State 2725 S Jones Blvd Ste 107, 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 24, 2019. 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.
D2094	<p>ROUTINE CHEMISTRY CFR(s): 493.841(e)</p> <p>(1) For any unsatisfactory analyte or test performance or testing event for reasons other than a failure to participate, the laboratory must undertake appropriate training and employ the technical assistance necessary to correct problems associated with a proficiency testing failure. (2) For any unacceptable analyte or testing event score, remedial action must be taken and documented, and the documentation must be maintained by the laboratory for two years from the date of participation in the proficiency testing event.</p> <p>This STANDARD is not met as evidenced by: Based on a review of the American Proficiency Institute (API) proficiency testing performed in Chemistry for the testing years 2018 and 2019 and an interview with the laboratory consultant, the laboratory failed to review, perform and document corrective action for unacceptable analytes and testing event scores. Findings include: 1. The laboratory failed to assess, develop and document a corrective action for the API first event Chemistry Core 2018 for Alkaline Phosphatase, Albumin and ALT which each had a scores of 80%. 2. The laboratory failed to assess, develop and document a corrective action for the API second event Chemistry Core 2018 for TIBC measured which had a failing score of 20%. 3. The laboratory failed to assess, develop and document a corrective action for the API second event Chemistry Core 2018 for Free Thyroxine, Thyroid Stimulating Hormone, Chloride, CO2, Magnesium,</p>

Phosphorus, Sodium and Total Protein which each had scores of 80%. This was confirmed by the laboratory consultant on April 24, 2019 at approximately 10:30 AM. The laboratory performs approximately 26,860 patient Chemistry tests annually.

D2128

HEMATOLOGY
CFR(s): 493.851(e)

(1) For any unsatisfactory analyte or test performance or testing event for reasons other than a failure to participate, the laboratory must undertake appropriate training and employ the technical assistance necessary to correct problems associated with a proficiency testing failure. (2) For any unacceptable analyte or testing event score, remedial action must be taken and documented, and the documentation must be maintained by the laboratory for two years from the date of participation in the proficiency testing event.

This STANDARD is not met as evidenced by:

Based on a review of the API proficiency testing results in Hematology for testing years 2018 and 2019 and an interview with the laboratory consultant, the laboratory failed to review, perform and document corrective action for unacceptable analytes and testing event scores. Findings include: 1. The laboratory failed to assess, develop and document a corrective action for the API second event 2018 for Monocytes which had a failing score of 20%. 2. The laboratory failed to assess, develop and document a corrective action for the API second event 2018 for Neutrophils which had a score of 80%. 3. The laboratory failed to assess, develop and document a corrective action for the API third event 2018 for Monocytes which had a score of 80%. 4. The laboratory failed to assess, develop and document a corrective action for the API third event 2018 for Erythrocyte Count which had a score of 80%. 5. The laboratory failed to assess, develop and document a corrective action for the API first event 2019 for Monocytes which had a failing score of 60%. This was confirmed by the laboratory consultant on April 24, 2019 at approximately 10:30 AM. The laboratory performs approximately 5,483 patient Hematology tests annually.