

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 29D2232333	(X3) Date Survey Completed 04/25/2024
Name of Provider or Supplier Rapid Lab	Street Address, City, State 2465 Reynolds Ave Ste 101, N 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 25, 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.
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 2022 and 2023 American Proficiency Institute (API) Proficiency Testing (PT) Chemistry Core results, a review of the laboratory's director approved PT policy, and an interview with the laboratory director on April 25, 2024 at approximately 10:45 AM, the laboratory failed to perform corrective action for unacceptable results. Findings include: 1. A review of the 2022 API Chemistry Core second event revealed that the laboratory failed to perform corrective action after achieving a score of 60% for AST. The laboratory performed a self-evaluation of the PT test event results on July 18, 2022 after being unable to participate when the results were to be submitted in May 2022 because of a testing problem in the laboratory during the month of May. The self-evaluation revealed that the laboratory obtained unacceptable AST results for samples CH-06 and CH-10. There was no documentation of corrective action. 2. A review of the 2023 API Chemistry Core second event revealed that the laboratory failed to perform corrective action after achieving scores of 80% for Total Bilirubin and Glucose. The completed Proficiency Testing Corrective Action form identified that the Total Bilirubin result for specimen CH-09 and the Glucose result for specimen CH-10 were unacceptable. "No corrective action was performed since the lab was not testing chemistry" was written on the</p>

form. The director confirmed during the interview that the statement meant that no patient testing for chemistry was performed during 2023. 3. The director approved Proficiency Testing policy identified specific steps to be taken in the event of obtaining any results less than 100% in the section entitled "Assessment of the Proficiency Testing Report." Step 6 states, "If possible, retest the retained proficiency testing samples, if applicable." 4. The director confirmed the findings during an interview conducted on April 25, 2024 at approximately 10:45 AM. The laboratory performs approximately 524,000 chemistry tests annually.

D6092

LABORATORY DIRECTOR RESPONSIBILITIES
CFR(s): 493.1445(e)(4)(iv)

The laboratory director must ensure an approved corrective action plan is followed when any proficiency testing result is found to be unacceptable or unsatisfactory.

This STANDARD is not met as evidenced by:
Based on a review of the 2022 and 2023 American Proficiency Institute (API) Proficiency Testing (PT) Chemistry Core results, a review of the laboratory's director approved PT policy, and an interview with the laboratory director on April 25, 2024 at approximately 10:45 AM, the director failed to ensure that the laboratory performed corrective action for unacceptable results. Findings include: 1. A review of the 2022 API Chemistry Core second event revealed that the director failed to ensure that the laboratory performed corrective action after achieving a score of 60% for AST. The laboratory performed a self-evaluation of the PT test event results on July 18, 2022 after being unable to participate when the results were to be submitted in May 2022 because of a testing problem in the laboratory during the month of May. The self-evaluation revealed that the laboratory obtained unacceptable AST results for samples CH-06 and CH-10. There was no documentation of corrective action. 2. A review of the 2023 API Chemistry Core second event revealed that the director failed to ensure that the laboratory performed corrective action after achieving scores of 80% for Total Bilirubin and Glucose. The completed Proficiency Testing Corrective Action form for the event identified that the Total Bilirubin result for specimen CH-09 and the Glucose result for specimen CH-10 were unacceptable. "No corrective action was performed since the lab was not testing chemistry" was written on the form. The director confirmed during the interview that the statement meant that no patient testing for chemistry was performed during 2023. 3. The director approved Proficiency Testing policy identified specific steps to be taken in the event of obtaining any results less than 100% in the section entitled "Assessment of the Proficiency Testing Report." Step 6 states, "If possible, retest the retained proficiency testing samples, if applicable." 4. The director confirmed the findings during an interview conducted on April 25, 2024 at approximately 10:45 AM. The laboratory performs approximately 524,000 chemistry tests annually.