Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	30D0002728	08/05/2026
Name of Provider or Supplier	**Street Address, City, State**	
Concord Hospital - Laconia	80 Highland St, Laconia, NH	

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	The following deficiencies are a result of a desk review of proficiency testing scores obtained from the national database and verified with the profiency testing company. The facility was found to be out of compliance with the conditions of the CLIA program. The following CONDITION LEVEL DEFICIENCIES were found to be out of compliance: D2016 - 42 C.F.R. 493.803 Condition: Successful participation [proficiency testing] D6076 - 42 C.F.R. 493.1441 Condition: Laboratories performing high complexity testing, laboratory director.
D2016	SUCCESSFUL PARTICIPATION CFR(s): 493.803(a)(b)(c) (a) Each laboratory performing nonwaived testing must successfully participate in a proficiency testing program approved by CMS, if applicable, as described in subpart I of this part for each specialty, subspecialty, and analyte or test in which the laboratory is certified under CLIA. (b) Except as specified in paragraph (c) of this section, if a laboratory fails to participate successfully in proficiency testing for a given specialty, subspecialty, analyte or test, as defined in this section, or fails to take remedial action when an individual fails gynecologic cytology, CMS imposes sanctions, as specified in subpart R of this part. (c) If a laboratory fails to perform successfully in a CMS-approved proficiency testing program, for the initial unsuccessful performance, CMS may direct the laboratory to undertake training of its personnel or to obtain technical assistance, or both, rather than imposing alternative or principle sanctions except when one or more of the following conditions exists: (1) There is immediate jeopardy to patient health and safety. (2) The laboratory fails to provide CMS or a CMS agent with satisfactory evidence that it has taken steps to correct the problem identified by the unsuccessful proficiency testing performance. (3) The laboratory has a poor compliance history. This CONDITION is not met as evidenced by: Based on review of Certification and Survey Provider Enhanced Reporting (CASPER)

	0155D and College of American Pathologists (CAP) proficiency testing (PT) records, the laboratory (lab) failed to successfully participate in a PT program for toxicology subspecialty and toxicology analytes (carbamazepine, digoxin, gentamycin, phenytoin, and tobramycin) in 2 (events 1 and 2 of 2026) consecutive PT events in 2026 resulting in unsuccessful performance. Refer to D2118 and D2119 for toxicology analytes and toxicology subspecialty, respectively.
D2118	TOXICOLOGY CFR(s): 493.845(f) (f) Failure to achieve satisfactory performance for the same analyte or test in two consecutive testing events or two out of three consecutive testing events is unsuccessful performance. This STANDARD is not met as evidenced by: Based on a desk review of proficiency testing (PT) records from the Certification and Survey Provider Enhanced Reporting (CASPER) 0155D report and College of American Pathology (CAP) 2026 PT records, the laboratory (lab) failed to obtain satisfactory performance scores for toxicology analytes carbamazepine, digoxin, gentamycin, phenytoin, and tobramycin in events 1 and 2 in 2026. Findings include: 1. Review on 8/5/2026 of CASPER 0155D report revealed the lab obtained the following scores for toxicology analytes in events 1 and 2 of 2026: 2026 event 1 / carbamazepine / 0% 2026 event 1 / digoxin / 0% 2026 event 1 / gentamycin / 0% 2026 event 1 / phenytoin / 0% 2026 event 1 / tobramycin / 0% 2026 event 2 / carbamazepine / 0% 2026 event 2 / digoxin / 0% 2026 event 2 / gentamycin / 0% 2026 event 2 / phenytoin / 0% 2026 event 2 / tobramycin / 0% 2. Review on 8/5/2026 of CAP PT evaluation reports for events C-A 2026 (event 1 of 2026) and C-B 2026 (event 2 of 2026) confirmed the above scores and revealed the lab failed to participate in both events.
D2119	TOXICOLOGY CFR(s): 493.845(g) (g) Failure to achieve an overall testing event score of satisfactory performance for two consecutive testing events or two out of three consecutive testing events is unsuccessful performance. This STANDARD is not met as evidenced by: Based on a desk review of proficiency testing (PT) records from the Certification and Survey Provider Enhanced Reporting (CASPER) 0155D report and College of American Pathology (CAP) 2026 PT records, the laboratory (lab) failed to obtain an overall satisfactory performance score for toxicology subspecialty in events 1 and 2 in 2026. Findings include: 1. Review on 8/5/2026 of CASPER 0155D report revealed the lab obtained the following overall scores for toxicology subspecialty in events 1 and 2 of 2026: 2026 event 1 / toxicology / 44% 2026 event 2 / toxicology / 44% 2. Review on 8/5/2026 of CAP PT evaluation reports for events C-A 2026 (event 1 of 2026) and C-B 2026 (event 2 of 2026) confirmed the above scores.
D6076	LABORATORY DIRECTOR CFR(s): 493.1441

	The laboratory must have a director who meets the qualification requirements of 493.1443 of this subpart and provides overall management and direction in accordance with 493.1445 of this subpart. This CONDITION is not met as evidenced by: Based on a desk review of proficiency testing (PT) records from Certification and Survey Provider Enhanced Reporting (CASPER) 0155D and College of American Pathologist (CAP), the laboratory director (LD) failed to ensure the lab successfully participated in PT for toxicology subspecialty and toxicology analytes (carbamazepine, digoxin, gentamycin, phenytoin, and tobramycin) in 2 (events 1 and 2 of 2026) consecutive PT events in 2026 resulting in unsuccessful performance. Cross reference D2016, D2118, and D2119.
D6089	LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(4)(i) (e)(4)(i) The proficiency testing samples are tested as required under subpart H of this part; This STANDARD is not met as evidenced by: Based on a desk review of proficiency testing (PT) records from Certification and Survey Provider Enhanced Reporting (CASPER) 0155D and College of American Pathologist (CAP), the laboratory director (LD) failed to ensure the lab successfully participated in PT for toxicology subspecialty and toxicology analytes (carbamazepine, digoxin, gentamycin, phenytoin, and tobramycin) in 2 (events 1 and 2 of 2026) consecutive PT events in 2026 resulting in unsuccessful performance. Cross reference D2016, D2118, and D2119.