

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  30D0086506	<b>(X3) Date Survey Completed</b>  03/14/2024
<b>Name of Provider or Supplier</b>  Androscoggin Valley Hosp Laboratory	<b>Street Address, City, State</b>  59 Page Hill Rd, Berlin, NH	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D5791</b>	<p><b>ANALYTIC SYSTEMS QUALITY ASSESSMENT</b> CFR(s): 493.1289(a)(c)</p> <p>(a) The laboratory must establish and follow written policies and procedures for an ongoing mechanism to monitor, assess, and when indicated, correct problems identified in the analytic systems specified in 493.1251 through 493.1283. (c) The laboratory must document all analytic systems assessment activities.</p> <p>This STANDARD is not met as evidenced by: Based on record review and staff interview, the laboratory's quality assurance procedures failed to document corrective action for problems identified when coagulation quality control (QC) procedures were not followed between September 2023 and March 2024. Findings include: 1. Review on 3/14/2024 of the laboratory's procedure titled "Hematology-Coagulation Quality Plan" revealed on page 3 instruction for the Section Head to review QC monthly ensuring two levels of Prothrombin Time (PT) and Partial Thromboplastin Time (PTT) controls were performed every 8 hours. 2. Review on 3/13/2024 of the QC log for PT and PTT testing from September 2023 through March 13, 2024 revealed QC for both tests were not documented for two-8 hour periods in September 2023, three-8 hour periods in October 2023, one-8 hour period in January 2024 and one-8 hour period in March 2024. There was no documentation indicating problems had been identified and followed up and/or corrective action taken as a result of the monthly review for the combined 12 of 14 missing PT and PTT QC testing. 3. Interview on 3/13/2024 at 9:45 a.m. with the Hematology Section Head confirmed QC documentation was missing from the QC logs and revealed steps to correct the issue had not been documented.</p>