

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 30D0086768	(X3) Date Survey Completed 11/30/2023
Name of Provider or Supplier Cottage Hospital	Street Address, City, State 90 Swiftwater Rd, Woodsville, 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
D5555	<p>IMMUNOHEMATOLOGY CFR(s): 493.1271(c)(f)</p> <p>(c) Blood and blood products storage. Blood and Blood products must be stored under appropriate conditions that include an adequate temperature alarm system that is regularly inspected. (c)(1) An audible alarm system must monitor proper blood and blood product storage temperature over a 24-hour period. (c)(2) Inspections of the alarm system must be documented. (f) Documentation. The laboratory must document all control procedures performed, as specified in this section.</p> <p>This STANDARD is not met as evidenced by: Based on record review and staff interview, the laboratory's frozen blood product storage system failed to include an adequate alarm that activates when temperature falls outside the acceptable range. Findings include: 1. Review on 11/30/2023 of the label for fresh frozen plasma (FFP) revealed the storage temperature must be less than -18 degrees Celsius (C). 2. An alarm test of the blood bank freezer, used to store FFP, was performed at 10:10 a.m. on 11/30/2023. Review of the electronic temperature log (TempTrak) during the alarm test revealed at 10:15 a.m. the temperature recorded was -5.6 C. No alarm was activated at the recording of this temperature. The alarm settings for this freezer were set for outside the range of -39.6 to -18.2 C 3. Interview on 11/30/2023 at 10:15 a.m. with the Technical Supervisor (TS1) revealed the alarm will be activated on a laboratory computer and another computer located in another unit (Med-Surg staffed 24/7). The laboratory computer received the alarm notification message at 10:30 a.m. 4. Interview with staff located at Med-Surg on 11/30/2023 at 10:30 a.m. revealed they had not received an alarm notification message on their computer. The alarm notification was later reported to have been received in Med-Surg at 10:37 a.m. 5. Interview on 11/30/2023 at 10:45 with Maintenance revealed the alarm notification was set to a 15 minute delay and the temperatures were set to record every 15 minutes.</p>

D6175

TESTING PERSONNEL RESPONSIBILITIES

CFR(s): 493.1495(b)(1)

Each individual performing high complexity testing must follow the laboratory's procedures for specimen handling and processing, test analyses, reporting and maintaining records of patient test results.

This STANDARD is not met as evidenced by:

Based on record review and staff interview, laboratory personnel failed to follow the laboratory's procedures for 1 of 5 manual cell counts performed in 2023. Findings include: 1. Review on 11/30/2023 of the laboratory's procedure titled "Synovial Fluid Analysis" revealed instruction to count all 9 squares of the Hemacytometer (with or without specimen dilution). 2. Review on 11/30/2023 of manual cell counts performed between June and November 2023 revealed for 1 of 5 records reviewed only 20% of 1 square had been counted and results reported. 3. Interview on 11/30/2023 with the Technical Supervisor (TS2) confirmed the above findings. 4. The laboratory's combined annual volume for manual white blood cell and red blood cell counts is 40.