

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 30D0979580	<b>(X3) Date Survey Completed</b> 06/08/2023
<b>Name of Provider or Supplier</b> Mid-State Health Center	<b>Street Address, City, State</b> 100 Robie Rd, Bristol, 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>D5447</b>	<p><b>CONTROL PROCEDURES</b> CFR(s): 493.1256(d)(3)(i)(g)</p> <p>Unless CMS Approves a procedure, specified in Appendix C of the State Operations Manual (CMS Pub. 7), that provides equivalent quality testing, the laboratory must-- At least once a day patient specimens are assayed or examined perform the following for-- Each quantitative procedure, include two control materials of different concentrations; (g) The laboratory must document all control procedures performed.</p> <p>This STANDARD is not met as evidenced by: Based on record review and staff interview, the laboratory failed to perform acceptable control testing before performing and reporting patient testing for 1 day in May 2023. Findings include: 1. Review on 6/8/2023 of the laboratory's "General QC Policy" revealed on page 2 "The technologist performing the assay must check that control results are within acceptable limits before reporting patient results." and on page 3 "Do not report patient results if QC is unacceptable." 2. Review on 6/8/2023 of control records from May 2023 for complete blood counts (CBC) revealed on 5/25/2023 2 (Level 2 and Level 3) of 3 control results failed to fall within acceptable ranges. There was no record that testing for Levels 2 and 3 had been repeated and found to be within acceptable limits on 5/25/2023. CBCs include the following measured analytes: white blood cell count, red blood cell count, platelet count, hemoglobin and white blood cell differential. 3. Review on 6/8/2023 of patient testing for 5/25/2023 revealed the laboratory reported 17 CBC test results. 4. Interview on 6/8/2023 at approximately 11:45 a.m. with the technical consultant confirmed the above findings.</p>
<b>D6072</b>	<p><b>TESTING PERSONNEL RESPONSIBILITIES</b> CFR(s): 493.1425(b)(3)</p> <p>Each individual performing moderate complexity testing must adhere to the</p>

laboratory's quality control policies, document all quality control activities, instrument and procedural calibrations and maintenance performed.

This STANDARD is not met as evidenced by:

Based on record review and staff interview, 1 of 2 testing personnel failed to follow the laboratory's hematology control procedures in May 2023. Findings include: 1. Review on 6/8/2023 of the laboratory's "General QC Policy" revealed on page 2 "The technologist performing the assay must check that control results are within acceptable limits before reporting patient results." and on page 3 "Do not report patient results if QC is unacceptable." 2. Review on 6/8/2023 of control records from May 2023 for complete blood counts (CBC) revealed on 5/25/2023 2 (Level 2 and Level 3) of 3 control results failed to fall within acceptable ranges. There was no record that testing for Levels 2 and 3 had been repeated and found to be within acceptable limits on 5/25/2023. CBCs include the following measured analytes: white blood cell count, red blood cell count, platelet count, hemoglobin and white blood cell differential. 3. Review on 6/8/2023 of patient testing for 5/25/2023 revealed the laboratory reported 17 CBC test results. 4. Interview on 6/8/2023 at approximately 11:45 a.m. with the technical consultant confirmed the above findings.