

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 32D0534781	(X3) Date Survey Completed 02/29/2024
Name of Provider or Supplier South Western Women's Options, Llc	Street Address, City, State 522 Lomas Blvd Ne, Albuquerque, NM	
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	An onsite recertification survey conducted on February 29, 2024, at Curtis Boyd, MD PC found the laboratory to be in compliance with the CLIA regulations found at 42 CFR, Part 493 Laboratory Requirements, with standard deficiencies cited.
D2007	<p>TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(1)</p> <p>The samples must be examined or tested with the laboratory's regular patient workload by personnel who routinely perform the testing in the laboratory, using the laboratory's routine methods</p> <p>This STANDARD is not met as evidenced by: Based on review of CMS 209 form, American Proficiency Institute (API) proficiency testing (PT) attestation form, and interview, the laboratory failed to ensure PT samples were entered into routine laboratory testing for 3 of 3 PT events in 2023. Findings included: 1. Review of CMS 209 listed 6 testing personnel (TP) performing moderate complexity testing. 1. Review of the API proficiency testing attestation forms from 2023 revealed the following: 1. Event 1 of 2023: - TP #2: Tested samples 1-5 - TP #3: Tested samples 1-5 - TP #4: Tested samples 1-5 - TP #5: Tested samples 1-5 - TP #6: Tested samples 1-5 - Laboratory Director: Tested samples 1-5 2. Event 2 of 2023: - TP #3: Tested samples 6, 7, 8, 9, 10 - TP #4: Tested samples 6, 7, 8, 9, 10 - TP #6: Tested samples 6, 7, 8, 9, 10 3. Event 3 of 2023: - TP #2: Tested samples 11, 12, 13, 14, 15 - Laboratory Director: Tested samples 11, 12, 13, 14, 15 - TP #3: Tested samples 11, 12, 13, 14, 15 - TP #5: Tested samples 11, 12, 13, 14, 15 2. Interview on 2/29/2024 at 10:30am with TP #2 stated, the facility's regular work routine is to have 1 testing personnel test a patient sample and it is not repeated or ran multiple times by other personnel unless results need to be verified, confirming the findings.</p>
D2009	<p>TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(1)</p>

The individual testing or examining the samples and the laboratory director must attest to the routine integration of the samples into the patient workload using the laboratory's routine methods.

This STANDARD is not met as evidenced by:

Based on review of American Proficiency Institute (API) proficiency testing (PT) records and interview, the laboratory failed to have the laboratory director or assigned designee sign the attestation forms for 2 of 3 PT events in 2023. Findings included: 1. Review of the API proficiency testing attestation forms from 2023 revealed the following: 1. Event 1 of 2023: Laboratory section signed by testing personnel #2. 2. Event 2 of 2023: Laboratory section signed by testing personnel #2 Laboratory director or assigned designee did not sign attestation form. 2. Interview on 2/29/2024 at 10:30am with testing person #2 confirmed the findings.

D5215

EVALUATION OF PROFICIENCY TESTING PERFORMANCE
CFR(s): 493.1236(b)(2)

The laboratory must verify the accuracy of any analyte, specialty or subspecialty assigned a proficiency testing score that does not reflect laboratory test performance (that is, when the proficiency testing program does not obtain the agreement required for scoring as specified in subpart I of this part, or the laboratory receives a zero score for nonparticipation, or late return or results).

This STANDARD is not met as evidenced by:

Based on review of American Proficiency Institute (API) proficiency testing (PT) review and corrective actions form and interview, the laboratory failed to evaluate PT performance and verify the accuracy of results for 3 of 3 PT events in 2023. Findings included: 1. Review of the API PT review and corrective actions form showed the following: 1. Event 1 of 2023: No form was provided, unable to verify if review or corrective actions were done. 2. Event 2 of 2023: Review and corrective actions form not signed with no additional documentation. Unable to verify review or corrective actions done. 3. Event 3 of 2023: PT was submitted late resulting in a score of 0. Review and corrective actions form not signed. No corrective actions were documented for late PT submission. 2. Interview on 2/29/2024 at 10:45am with testing person #2 confirmed the findings