Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 37D0475237	(X3) Date Survey Completed 10/04/2018
Name of Provider or Supplier Muscogee (Creek) Nation Medical Center	**Street Address, City, State** 1401 Morris Drive, Okmulgee, OK	
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.
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 a desk review of proficiency testing scores, the laboratory failed to successfully participate in a proficiency testing program for the subspecialties of General Immunology, ABO Group and D (Rho) Typing, Unexpected Antibody Detection, and Compatibility Testing. Findings include: (1) The laboratory failed to achieve satisfactory performance for two consecutive testing events for HIV testing. Refer to D2082 and D2084; (2) The laboratory failed to achieve satisfactory

	performance for two consecutive testing event for ABO Group and D (Rho) Typing. Refer to D2160 and D2162; (3) The laboratory failed to achieve satisfactory performance for two consecutive testing events for Unexpected Antibody Detection. Refer to D2170 and D2172; (4) The laboratory failed to achieve satisfactory performance for two consecutive testing events for Compatibility Testing. Refer to D2179 and D2181.
D2082	GENERAL IMMUNOLOGY CFR(s): 493.837(e) (1) For any unsatisfactory analyte or test performance or testing event for reasons other than a failure to participate, the laboratory must undertake appropriate training and employ the technical assistance necessary to correct problems associated with a proficiency testing failure. (2) For any unacceptable analyte or testing event score, remedial action must be taken and documented, and the documentation must be maintained by the laboratory for two years from the date of participation in the proficiency testing event. This STANDARD is not met as evidenced by: Based on a desk review of proficiency testing scores, the laboratory failed to achieve successful performance for HIV testing. Findings include: (1) The laboratory failed to achieve satisfactory performance on the first event in 2018 and the second event in 2018. Refer to D2084. NOTE: The only acceptable plan of correction for this deficiency is to undertake training of personnel and obtain the necessary technical assistance.
D2084	GENERAL IMMUNOLOGY CFR(s): 493.837(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 scores, the laboratory failed to achieve satisfactory performance for HIV testing in two consecutive testing events. Findings include: (1) The laboratory received a score of 0% on the first event in 2018 and a score of 0% on the second event in 2018. NOTE: The only acceptable plan of correction for this deficiency is to undertake training of personnel and obtain the necessary technical assistance.
D2160	ABO GROUP AND D(RHO) TYPING CFR(s): 493.859(e) (1) For any unsatisfactory testing event for reasons other than a failure to participate, the laboratory must undertake appropriate training and employ the technical assistance necessary to correct problems associated with a proficiency testing failure. (2) For any unacceptable analyte or unsatisfactory testing event score, remedial action must be taken and documented, and the documentation must be maintained by the laboratory for two years from the date of participation in the proficiency testing event.

	This STANDARD is not met as evidenced by: Based on a desk review of proficiency testing scores, the laboratory failed to achieve successful performance for ABO Group and D (Rho) Typing. Findings include: (1) The laboratory failed to achieve satisfactory performance on the first event in 2018 and the second event in 2018. Refer to D2162. NOTE: The only acceptable plan of correction for this deficiency is to undertake training of personnel and obtain the necessary technical assistance.
D2162	ABO GROUP AND D(RHO) TYPING CFR(s): 493.859(f) Failure to achieve satisfactory performance for the same analyte 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 scores, the laboratory failed to achieve satisfactory performance for ABO Group and D (Rho) Typing in two consecutive testing events. Findings include: (1) The laboratory received a score of 0% on the first event in 2018 and a score of 0% on the second event in 2018. NOTE: The only acceptable plan of correction for this deficiency is to undertake training of personnel and obtain the necessary technical assistance.
D2170	UNEXPECTED ANTIBODY DETECTION CFR(s): 493.861(d) (1) For any unsatisfactory testing event for reasons other than a failure to participate, the laboratory must undertake appropriate training and employ the technical assistance necessary to correct problems associated with a proficiency testing failure. (2) For any unsatisfactory testing event score, remedial action must be taken and documented, and the documentation must be maintained by the laboratory for two years from the date of participation in the proficiency testing event. This STANDARD is not met as evidenced by: Based on a desk review of proficiency testing scores, the laboratory failed to achieve successful performance for Antibody Detection. Findings include: (1) The laboratory failed to achieve satisfactory performance on the first event in 2018 and the second event in 2018. Refer to D2172. NOTE: The only acceptable plan of correction for this deficiency is to undertake training of personnel and obtain the necessary technical assistance.
D2172	UNEXPECTED ANTIBODY DETECTION CFR(s): 493.861(e) Failure to achieve an overall testing event score of satisfactory 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 scores, the laboratory failed to achieve satisfactory performance for Antibody Detection in two consecutive testing events. Findings include: (1) The laboratory received a score of 0% on the first event in 2018 and a score of 0% on the second event in 2018. NOTE: The only acceptable plan of correction for this deficiency is to undertake training of personnel and obtain the necessary technical assistance.
D2179	COMPATIBILITY TESTING CFR(s): 493.863(d) (1) For any unsatisfactory testing event for reasons other than a failure to participate, the laboratory must undertake appropriate training and employ the technical assistance necessary to correct problems associated with a proficiency testing failure. (2) For any unsatisfactory testing event score, remedial action must be taken and documented, and the documentation must be maintained by the laboratory for two years from the date of participation in the proficiency testing event. This STANDARD is not met as evidenced by: Based on a desk review of proficiency testing scores, the laboratory failed to achieve successful performance for Compatibility Testing. Findings include: (1) The laboratory failed to achieve satisfactory performance on the fist event in 2018 and the second event in 2018. Refer to D2181. NOTE: The only acceptable plan of correction for this deficiency is to undertake training of personnel and obtain the necessary technical assistance.
D2181	COMPATIBILITY TESTING CFR(s): 493.863(e) Failure to achieve an overall testing event score of satisfactory 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 scores, the laboratory failed to achieve satisfactory performance for Compatibility Testing in two consecutive testing events. Findings include: (1) The laboratory received a score of 0% on the first event in 2018, a score of 0% on the second event in 2018. NOTE: The only acceptable plan of correction for this deficiency is to undertake training of personnel and obtain the necessary technical assistance.