

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 37D0669880	<b>(X3) Date Survey Completed</b> 03/25/2022
<b>Name of Provider or Supplier</b> Eufaula Indian Health Center	<b>Street Address, City, State</b> 500 Eunice Burns Rd, Eufaula, OK	
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>D0000</b>	The recertification survey was performed on 03/24/22 and 03/25/2022. The findings were reviewed with technical consultant #1 and technical consultant #2 at the conclusion of the survey. The laboratory was found in compliance with standard-level deficiencies cited.
<b>D5435</b>	<p><b>MAINTENANCE AND FUNCTION CHECKS</b> CFR(s): 493.1254(b)(2)</p> <p>For equipment, instruments, or test systems developed in-house, commercially available and modified by the laboratory, or maintenance and function check protocols are not provided by the manufacturer, the laboratory must: (i) Define a function check protocol that ensures equipment, instrument, and test system performance that is necessary for accurate and reliable test results and test result reporting. (ii) Perform and document the function checks, including background or baseline checks, specified in paragraph (b)(2)(i) of this section. Function checks must be within the laboratory's established limits before patient testing is conducted.</p> <p>This STANDARD is not met as evidenced by: Based on a review of records, written policy, and interview with technical consultant #1, the laboratory failed to follow their written protocol for ensuring the urine centrifuge and the blood centrifuge were functioning properly for one of two function checks performed. Findings include: (1) On 03/24/2022 at 11:45 am, technical consultant #1 stated the following to the surveyor: (a) The laboratory processed urine microscopic specimens at a speed of 1500 rpm (revolutions per minute) for five minutes using the Drucker 614L centrifuge; (b) The laboratory processed chemistry specimens at a speed of 3300 rpm for 5 minutes using the Drucker 642B centrifuge. (2) The surveyor reviewed the function check policy titled, "Maintenance and Function Checks", which stated: (a) "VI Procedure" (i) "A. Centrifuge" (aa) "1. Function checks for RPM and timer accuracy are performed by the MCNDH Net Facilities Department twice a year or as specified by the equipment manufacturer.";</p>

(3) The surveyor reviewed the centrifuge records from 2020 through 2021 with the following identified for one of two checks performed: (a) Urine Centrifuge had been performed once in 2021 (02/26/2021); (b) Blood Centrifuge had been performed once in 2021 (02/26/2021). (4) The surveyor reviewed the findings with technical consultant #1 who stated on 03/24/2022 at 02:50 pm, the centrifuge function checks had not been performed twice in 2021.

**D6054**

**TECHNICAL CONSULTANT RESPONSIBILITIES**  
CFR(s): 493.1413(b)(9)

The technical consultant is responsible for evaluating and documenting the performance of individuals responsible for moderate complexity testing at least annually, after the first year.

This STANDARD is not met as evidenced by:

Based on a review of records and interview with technical consultant #1, the technical consultant failed to ensure annual evaluations of all moderate complexity testing had been performed for one of three testing persons. Findings include: (1) On 03/24/2022 at 11:50 am, technical consultant #1 stated to the surveyor: (a) The laboratory performed Wet Prep analysis. (2) The surveyor reviewed 2021 personnel records for three testing persons and identified for one of three testing persons: (a) Testing Person #3 - There was no evidence an annual competency had been performed. (3) The surveyor reviewed the findings with technical consultant #1 who stated on 03/24/2022 at 03:30 pm that an annual competency had not been performed as indicated above.