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| <b>Statement of Deficiencies</b>                                                                                           | <b>(X1) Provider/Supplier/CLIA Identification Number</b><br><br>38D0628209 | <b>(X3) Date Survey Completed</b><br><br>11/13/2018 |
| <b>Name of Provider or Supplier</b><br><br>Lake District Hospital                                                          | <b>Street Address, City, State</b><br><br>700 South J Street, Lakeview, OR |                                                     |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
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| D2016              | <p>SUCCESSFUL PARTICIPATION<br/>CFR(s): 493.803(a)(b)(c)</p> <p>(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.</p> <p>This CONDITION is not met as evidenced by:<br/>Proficiency Testing (PT) desk review of the American Association of Bioanalysts (AAB) proficiency testing (PT) shows the laboratory had unsuccessful participation for the Analyte Free Thyroxine in Endocrinology. Refer to D2099 and D2107.</p> |
| D2099              | <p>ENDOCRINOLOGY<br/>CFR(s): 493.843(b)</p> <p>Failure to attain an overall testing event score of at least 80 percent is unsatisfactory performance.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |

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|              | <p>This STANDARD is not met as evidenced by:<br/> Review of Proficiency testing shows the laboratory failed to attain an overall of 80 percent in Endocrinology. Findings include: 1. 2nd event of 2018 - Endocrinology = 66% 2. 3rd event of 2018 - Endocrinology = 66%</p>                                                                                                                                                                                                                                                |
| <b>D2107</b> | <p>ENDOCRINOLOGY<br/> CFR(s): 493.843(f)</p> <p>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.</p> <p>This STANDARD is not met as evidenced by:<br/> Review of Proficiency testing shows the laboratory failed two consecutive testing events for the analyte Free Thyroxine. Findings include: 1. 2nd event 2018 - Free Thyroxine = 0% 2. 3rd event 2018 - Free Thyroxine = 0%</p> |