Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 38D0628589	(X3) Date Survey Completed 05/04/2022
Name of Provider or Supplier Pioneer Memorial Hospital Lab	**Street Address, City, State** 564 E Pioneer Dr, Heppner, 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
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: Proficiency Testing (PT) desk review of the American Association of Bioanalysts (AAB) proficiency testing (PT) showed the laboratory had unsuccessful participation for the 2nd event 2021 and 1st event 2022 for the Specialty Immunohematology. Refer to D2173, D2179, and D2181.
D2173	COMPATIBILITY TESTING CFR(s): 493.863(a) Failure to attain an overall testing event score of at least 100 percent is unsatisfactory

	performance. This STANDARD is not met as evidenced by: PT desk review of the American Association of Bioanalyst (AAB) PT reveals that the laboratory failed to achieved a 100% for compatibility testing. Findings include: 1.. AAB PT 2nd Event 2021 Compatibility Testing - 80%. 2. AAB PT 1st Event 2022 Compatibility Testing - 60%.
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: PT desk review of the AAB PT reveals that the laboratory failed two testing events for compatibility testing. Findings include: 1. AAB PT 2nd Event 2021 Compatibility Testing - 80%. 2. AAB PT 1st Event 2022 Compatibility Testing - 60%.
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: PT desk review of the AAB PT reveals that the laboratory failed two out of three consecutive testing events for compatibility testing. Findings include: 1. AAB PT 2nd Event 2021 Compatibility Testing - 80%. 2. AAB PT 1st Event 2022 Compatibility Testing - 60%.