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|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|-----------------------------------------------------|
| <b>Statement of Deficiencies</b>                                                                                           | <b>(X1) Provider/Supplier/CLIA Identification Number</b><br><br>39D0189070   | <b>(X3) Date Survey Completed</b><br><br>04/29/2020 |
| <b>Name of Provider or Supplier</b><br><br>Bucktail Medical Center                                                         | <b>Street Address, City, State</b><br><br>1001 Pine Street, South Renovo, PA |                                                     |
| 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/>Based on a review of the CASPER Report 155 report and graded results from the proficiency testing organization Wisconsin State Lab of Hygiene (WSLH) and American Association of Bioanalysts, the laboratory failed to successfully participate in proficiency testing for the analyte Prothrombin Time. Refer to D2130.</p> |
| D2130              | <p>HEMATOLOGY<br/>CFR(s): 493.851(f)</p> <p>Failure to achieve satisfactory performance for the same analyte in two consecutive</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |

events or two out of three consecutive testing events is unsuccessful performance.

This STANDARD is not met as evidenced by:

Based on a review of the CASPER 155 report and graded results from the proficiency testing organization Wisconsin State Lab Hygiene (WSLH) and American Association of Bioanalysts (AAB), the laboratory failed to successfully participate in proficiency testing for the analyte: Prothrombin Time (PT). The laboratory had unsatisfactory scores for the 3rd event of 2019, and 1st event 2020. Findings include:  
Analyte Year Event Score PT Program PT 2019 3 0 AAB PT 2020 1 60 WSLH