

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 39D2177163	(X3) Date Survey Completed 03/05/2024
Name of Provider or Supplier Highlands Hospital Toxicology Laboratory	Street Address, City, State 700 Park Street, Lower Level, Connellsville, 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
D5439	<p>CALIBRATION AND CALIBRATION VERIFICATION CFR(s): 493.1255(b)</p> <p>Unless otherwise specified in this subpart, for each applicable test system the laboratory must do the following: Perform and document calibration verification procedure - (b)(1) Following the manufacturer's calibration verification instructions; (b)(2) Using the criteria verified or established by the laboratory under 493.1253(b)(3) -- (b)(2)(i) Including the number, type, and concentration of the materials, as well as acceptable limits for calibration verification; and (b)(2)(ii) Including at least a minimal (or zero) value, a mid-point value, and a maximum value near the upper limit of the range to verify the laboratory's reportable range of test results for the test system; and (b)(3) At least once every 6 months and whenever any of the following occur: (b)(3)(i) A complete change of reagents for a procedure is introduced, unless the laboratory can demonstrate that changing reagent lot numbers does not affect the range used to report patient test results, and control values are not adversely affected by reagent lot number changes. (b)(3)(ii) There is major preventive maintenance or replacement of critical parts that may influence test performance. (b)(3)(iii) Control materials reflect an unusual trend or shift, or are outside of the laboratory's acceptable limits, and other means of assessing and correcting unacceptable control values fail to identify and correct the problem. (b)(3)(iv) The laboratory's established schedule for verifying the reportable range for patient test results requires more frequent calibration verification.</p> <p>This STANDARD is not met as evidenced by: Based on lack of documentation and interview with the general supervisor (GS) (CMS 209 personnel # 2), the laboratory failed to perform calibration verification at least once every six months for 1 of 1 CLC 720 Carolina Liquid Chemistries analyzer from 01/01/2023 to 08/07/2023. Findings include: 1. On the date of the survey, 03/05/2024 at 02:30 pm, the laboratory could not provide calibration verification records for the required analytes tested on 1 of 1 CLC 720 Carolina Liquid Chemistries analyzer</p>

from 01/01/2023 to 08/07/2023. 2. According to the laboratory's calibration verification procedure, calibration verification should be performed bi-annually on the CLC 720 Carolina Liquid Chemistries analyzer. 3. The GS confirmed the finding above on 03/05/2024 at 4:20 pm.