

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 39D2228255	<b>(X3) Date Survey Completed</b> 10/21/2021
<b>Name of Provider or Supplier</b> Psh Hampden Medical Center Poct	<b>Street Address, City, State</b> 2200 Good Hope Rd, Enola, PA	
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>D5421</b>	<p><b>ESTABLISHMENT AND VERIFICATION OF PERFORMANCE</b> CFR(s): 493.1253(b)(1)</p> <p>Each laboratory that introduces an unmodified, FDA-cleared or approved test system must do the following before reporting patient test results: (1)(i) Demonstrate that it can obtain performance specifications comparable to those established by the manufacturer for the following performance characteristics: (1)(i)(A) Accuracy. (1)(i)(B) Precision. (1)(i)(C) Reportable range of test results for the test system. (1)(ii) Verify that the manufacturer's reference intervals (normal values) are appropriate for the laboratory's patient population.</p> <p>This STANDARD is not met as evidenced by: Based on review of the Abbott istat analyzer validation records and interview with technical consultant (TC) #1, the laboratory failed to demonstrate and document the performance specifications of precision and accuracy for chemistry analytes performed on the Abbott istat Chem 8+ Cartridges used from 10/01/2021 to 10/21/2021. Findings Include: 1. On the day of survey, 10/21/2021, review of the Abbott istat Chem 8+ Cartridge validation records revealed, the validation performed on 08/31/2021 did not include performance specifications for precision and accuracy. 2. From 10/01/2021 to 10/21/2021, 53 patients were analyzed on the Abbot istat. 3. TC #1 confirmed the finding above on 10/21/2021 around 09:55 a.m.</p>
<b>D5775</b>	<p><b>COMPARISON OF TEST RESULTS</b> CFR(s): 493.1281(a)(c)</p> <p>(a) If a laboratory performs the same test using different methodologies or instruments, or performs the same test at multiple testing sites, the laboratory must have a system that twice a year evaluates and defines the relationship between test results using the different methodologies, instruments, or testing sites. (c) The laboratory must document all test result comparison activities.</p>

This STANDARD is not met as evidenced by:

Based on review of the laboratory's procedure and interview with Technical Consultant (TC)#1, the laboratory failed to establish a procedure to evaluate biannual relationship between 7 of 7 Abbott Istat analyzers using the chem8+ cartridges from 10/1/2021 to 10/21/2021 Findings include; 1. On the day of survey 10/21/2021, the laboratory could not provide a procedure to evaluate the biannual relationship between 7 of 7 Abbott Istat analyzers from 10/01/2021 to 10/21/2021. 2. The TC#1 confirmed the finding above on 10/21/2021 at 10:05 a.m.