

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 42D0251670	(X3) Date Survey Completed 05/30/2019
Name of Provider or Supplier Mcleod Primary Care Cheraw	Street Address, City, State 710 Chesterfield Hwy, Cheraw, SC	
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: During a proficiency testing desk review performed on 05/30/2019, based on review of CASPER report 155D and graded reports from American Acadamey of Family Physicians (AAFP), it was determined that the laboratory failed to successfully participate in proficiency testing for the specialty of chemistry, the analyte alanine aminotransferase (ALT) for two consecutive proficiency testing events reviewed (2018, Event 3 and 2019, Event 1). See D2087, D2096
D2087	ROUTINE CHEMISTRY CFR(s): 493.841(a)

Failure to attain a score of at least 80 percent of acceptable responses for each analyte in each testing event is unsatisfactory analyte performance for the testing event.

This STANDARD is not met as evidenced by:

During the proficiency testing desk review performed on 05/30/2019, based on review of CASPER report 155D and graded proficiency reports from AAFP, it was determined that the laboratory failed to attain a satisfactory score of at least 80% for alanine aminotransferase (ALT) on two consecutive proficiency testing events. Findings include: 1. The CASPER 155D report revealed the following scores for your laboratory's ALT: a. 2018, Event 3: 60% b. 2019, Event 1: 40% 2. The scores were confirmed by review of the graded AAFP results. Scores less than 80% for these analytes indicate failure or unsatisfactory performance. A failure of the analytes for two consecutive or two out of three testing events is scored as unsuccessful. A failure of the analyte for three consecutive or three out of four/five events is scored as a repeat unsuccessful.

D2096

ROUTINE CHEMISTRY
CFR(s): 493.841(f)

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.

This STANDARD is not met as evidenced by:

During a proficiency testing desk review performed on 05/30/2019, based on review of the CASPER 155D report and graded report from AAFP, it was determined that the laboratory failed to achieve satisfactory performance for alanine aminotransferase (ALT) in two consecutive testing events (2018, Event 3 and 2019, Event 1). See D2087.