

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 44D0312039	(X3) Date Survey Completed 07/08/2026
Name of Provider or Supplier Scott County Community Hospital, Inc	Street Address, City, State 18797 Alberta St, Oneida, TN	
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
D0000	An off-site revisit survey was completed on August 4, 2026, for all previous deficiencies cited on the focused complaint survey performed on July 8, 2026. All deficiencies related to the focused complaint survey have been corrected and no new noncompliance was found. The facility is in compliance with 42 CFR Part 493, Requirements for Laboratories.
D5401	PROCEDURE MANUAL CFR(s): 493.1251(a) (a) A written procedures manual for all tests, assays, and examinations performed by the laboratory must be available to, and followed by, laboratory personnel. Textbooks may supplement but not replace the laboratory's written procedures for testing or examining specimens. This STANDARD is not met as evidenced by: No deficiency details available.
D5417	TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(d) (d) Reagents, solutions, culture media, control materials, calibration materials, and other supplies must not be used when they have exceeded their expiration date, have deteriorated, or are of substandard quality. This STANDARD is not met as evidenced by: No deficiency details available.