

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  44D0315624	<b>(X3) Date Survey Completed</b>  05/10/2019
<b>Name of Provider or Supplier</b>  Prime Care Medical-Henderson	<b>Street Address, City, State</b>  426 White Avenue, Henderson, TN	
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>D2016</b>	<p><b>SUCCESSFUL PARTICIPATION</b> 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: The laboratory failed to maintain satisfactory participation i two out of three events for the automated white blood cell (WBC) differential, resulting in the first unsuccessful proficiency testing (PT) occurrence for the automated WBC differential analytes. (Refer to D2130)</p>
<b>D2130</b>	<p><b>HEMATOLOGY</b> 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 desk review of the Centers for Medicare and Medicaid Services Casper Report 155 (CMS 155) and the laboratory's proficiency testing (PT) records, the laboratory failed to maintain satisfactory performance for the automated white blood cell (WBC) differential for two out of three events (2018 event two and 2019 event one) resulting in the first unsuccessful occurrence. The findings include: 1) Review of the CMS 155 report revealed failing scores for the Automated WBC differential as follows: 2018 event two score=0%; 2019 event one score =0%. 2) Review of the 2018 event two PT evaluation report revealed the following: Granulocytes-Sample numbers HEM-01, HEM-02, HEM-03, HEM-04, HEM-05-Scored as unacceptable; Lymphocytes-Sample numbers HEM-01, HEM-02, HEM-03, HEM-04, HEM-05-Scored as unacceptable; Monocytes/Mids-Sample numbers HEM-01, HEM-02, HEM-03, HEM-04, HEM-05-Scored as unacceptable; resulting in an overall score of 0%. 3) Review of the 2019 event one PT evaluation report revealed the following: Granulocytes-Sample numbers HEM-06, HEM-07, HEM-08, HEM-09, HEM-10-Scored as unacceptable; Lymphocytes-Sample numbers HEM-01, HEM-02, HEM-03, HEM-04, HEM-05-Scored as unacceptable; Monocytes/Mids-Sample numbers HEM-01, HEM-02, HEM-03, HEM-04, HEM-05-Scored as unacceptable; resulting in an overall score of 0%.