

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 44D0315721	(X3) Date Survey Completed 01/28/2020
Name of Provider or Supplier Decatur County General Hospital	Street Address, City, State 969 Tennessee Avenue S, Parsons, 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
D2016	<p>SUCCESSFUL PARTICIPATION 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 performance for the compatibility analyte in 2019 events two and three, resulting in the first unsuccessful performance for the compatibility analyte. (Refer to D2181).</p>
D2181	<p>COMPATIBILITY TESTING CFR(s): 493.863(e)</p> <p>Failure to achieve an overall testing event score of satisfactory for two consecutive testing events or two out of three consecutive testing events is unsuccessful</p>

performance.

This STANDARD is not met as evidenced by:

Based on a desk review of the Centers for Medicare and Medicaid Casper Report 155 (CMS 155) and the laboratory's 2019 proficiency testing (PT) records, the laboratory failed to maintain satisfactory performance for the compatibility analyte in 2019 events two and three, resulting in the first unsuccessful occurrence. The findings include: 1) Review of the CMS 155 report revealed the following unsatisfactory scores for compatibility testing: 2019 event two = 0%, 2019 event three = 80%. 2) Review of the laboratory's 2019 event two PT records revealed a score of 0% for the compatibility analyte for "Failure to Participate." 3) Review of the laboratory's 2019 event three PT records revealed sample number SER-15 scored as unacceptable for compatibility testing, resulting in an overall score of 80% for the compatibility analyte, and the first unsuccessful performance.