

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 44D0914241	(X3) Date Survey Completed 05/22/2019
Name of Provider or Supplier Jasper Medical Center	Street Address, City, State 4665 Main St, Suite 2, Jasper, 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
D2007	<p>TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(1)</p> <p>The samples must be examined or tested with the laboratory's regular patient workload by personnel who routinely perform the testing in the laboratory, using the laboratory's routine methods</p> <p>This STANDARD is not met as evidenced by: Based on a review of 2018 and 2019 Proficiency Testing (PT) attestation records and an interview with the office manager, it was determined the laboratory did not involve all 3 testing personnel in rotating PT samples for complete blood counts during the 2 year period. Findings include: 1. A review of PT records from 2018 and 2019 disclosed the primary lab person (TP2) did all testing of PT samples. 2. An interview with the office manager at 11 AM on May 22, 2019, confirmed she was the only person running PT samples for the 2 year period.</p>