| **Statement of Deficiencies** | **(X1) Provider/Supplier/CLIA Identification Number** | **(X3) Date Survey Completed** |
|---|---|---|
| | 44D1070351 | 05/16/2022 |
| **Name of Provider or Supplier** | **Street Address, City, State** | |
| Saint Francis Physician Network, Llc | 2996 Kate Bond Road Suite 205, Bartlett, 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 |
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| **D2016** | SUCCESSFUL PARTICIPATION<br>CFR(s): 493.803(a)(b)(c)<br><br>(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.<br><br>This CONDITION is not met as evidenced by:<br>The laboratory failed to maintain satisfactory participation in two out of three proficiency testing (PT) events for the White Blood Cell Differential (WBC Diff) analyte resulting in the first unsuccessful proficiency testing (PT) occurrence for the WBC Diff analyte. (Refer to D2130) |
| **D2130** | HEMATOLOGY<br>CFR(s): 493.851(f)<br><br>Failure to achieve satisfactory performance for the same analyte in two consecutive |

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| | events or two out of three consecutive testing events is unsuccessful performance.<br><br>This STANDARD is not met as evidenced by:<br>Based on review of the Centers for Medicare and Medicaid Services Casper report 155 (CMS 155) and the laboratory's 2021 event two and 2022 event one proficiency testing (PT) evaluation reports, the laboratory failed to maintain a satisfactory performance the White Blood Cell Differential (WBC Diff) analyte in two out of three PT events, resulting in the first unsuccessful PT occurrence for the WBC Diff analyte. The finding include: 1) Review of the CMS 155 revealed the following unsatisfactory PT scores for the WBC Diff analyte: 2021 Event two = 0% 2022 Event one = 40% 2) Review of the laboratory's 2021 PT evaluation report for event two revealed a score of 0% for 'Failure to Participate. 3) Review of the laboratory's 2022 PT evaluation report for event one revealed the following: a. Granulocytes: samples numbers HEM-02, HEM-03, HEM-04, HEM-05 scored as unacceptable in a score of 20%. b. Lymphocytes: sample numbers HEM-02, Hem-03, and HEM-05 scored as unacceptable in a score of 40%. c. Monocytes: sample numbers HEM-01 and HEM-03 scored as unacceptable with a score of 60%, resulting in an overall score for the WBC Diff analyte of 40% and the first unsuccessful PT occurrence. |