

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 44D1081456	(X3) Date Survey Completed 08/08/2018
Name of Provider or Supplier Priority Care, Llc	Street Address, City, State 5751 Bradford Hicks Dr, Livingston, 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
D2015	<p>TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(5)(6)</p> <p>(5) The laboratory must document the handling, preparation, processing, examination, and each step in the testing and reporting of results for all proficiency testing samples. The laboratory must maintain a copy of all records, including a copy of the proficiency testing program report forms used by the laboratory to record proficiency testing results including the attestation statement provided by the PT program, signed by the analyst and the laboratory director, documenting that proficiency testing samples were tested in the same manner as patient specimens, for a minimum of two years from the date of the proficiency testing event. (6) PT is required for only the test system, assay, or examination used as the primary method for patient testing during the PT event.</p> <p>This STANDARD is not met as evidenced by: Based on a review of proficiency testing (PT) record's attestation statements for 2016-18 and an interview with the lead lab nurse, the laboratory failed to ensure the laboratory director and 8 of 8 testing persons (TP)/ analysts performing the hematology complete blood count (CBC) PT events' specimens signed the attestation statements in 2016-2018. Findings include: 1. There was no laboratory director's signatures on attestation statements for PT events for CBC specimens from 2016-18 available to review. 2. There were no TP/analysts signatures for eight of eight TP analysts for PT events for CBC specimens from 2016-18 available to review. 3. In an interview, August 8, 2018, at 10:30am, the lead lab nurse confirmed the missing laboratory director and 8 of 8 TP analyst's signatures on the attestation statements for the hematology complete blood count (CBC) PT events' specimens for 2016-18.</p>
D6018	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1407(e)(4)(iii)</p>

The laboratory director is responsible for the overall operation and administration of the laboratory, including the employment of personnel who are competent to perform test procedures, and record and report test results promptly, accurate, and proficiently and for assuring compliance with the applicable regulations. (e) The laboratory director must-- (e)(4)(iii) Ensure that all proficiency testing reports received are reviewed by the appropriate staff to evaluate the laboratory's performance and to identify any problems that require corrective action;

This STANDARD is not met as evidenced by:

Based on review of the Proficiency testing agency (American Proficiency Institute - API) performance evaluation summary reports and interview with the lead lab nurse determined the laboratory director did not evaluate the laboratory's PT performance for hematology complete blood count (CBC) on six of six PT events' results for 2016-18. . The findings include: 1. Review of API Performance Summary reports revealed the laboratory director failed to evaluate the laboratory's performance for 6 of 6 PT events in 2016-2018 for CBC. 2. Interview with the Laboratory Supervisor on August 8, 2018 at 10:50am confirmed the laboratory director did not review the performance evaluation summary reports for 6 of 6 PT events in 2016-2018 for CBC.