Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	45D2087711	09/30/2025
Name of Provider or Supplier	**Street Address, City, State**	
Kickapoo Community Health Center	2192 Rosita Valley Road, Eagle Pass, TX	

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
D5429	MAINTENANCE AND FUNCTION CHECKS CFR(s): 493.1254(a)(1) (a)(1) Maintenance as defined by the manufacturer and with at least the frequency specified by the manufacturer. This STANDARD is not met as evidenced by: Based on review of the Siemens EXL 200 analyzer's monthly maintenance records from July 2024 to May 2025, and staff interview, the laboratory failed to have documentation of performing complete monthly maintenance for 5 of 11 months. The findings included: 1. A review of the laboratory's Siemens EXL 200 analyzer's monthly maintenance records from July 2024 to May 2025 identified the following 7 maintenance procedures to be performed monthly: Replace IMT pump tubing Clean IMT system Clean clot check drain Replace/clean air filters Stylet HM wash probes Replace HM pump head Reagent drain cleaning 2. Further review of the records identified the following months with missing documentation of maintenance being performed: a) July 2024 Missing: Replace/clean air filters Replace HM pump head Reagent drain cleaning b) November 2024 Replace IMT pump tubing Clean IMT system c) December 2024 Stylet HM wash probes Replace HM pump head Reagent drain cleaning d) March 2025 Replace HM pump head e) May 2025 Replace IMT pump tubing Clean IMT system Clean clot check drain Replace/clean air filters Replace HM pump head Reagent drain cleaning 3. Testing personnel number 1 (as listed on Form CMS 209) confirmed the findings after her review of the record on 09/30/2025 at 1100 hours in the office.
D5783	CORRECTIVE ACTIONS CFR(s): 493.1282(b)(2) (b)(2) Results of control or calibration materials, or both, fail to meet the laboratory's established criteria for acceptability. All patient test results obtained in the

	unacceptable test run and since the last acceptable test run must be evaluated to determine if patient test results have been adversely affected. The laboratory must take the corrective action necessary to ensure the reporting of accurate and reliable patient test results. This STANDARD is not met as evidenced by: Based on review of the laboratory's quality control records from July 2025 and August 2025, review of patient test records from July 22, 2025, August 5, 2025 and August 8, 2025, and staff interview, the laboratory failed to have documentation of remediating patients on 3 of 3 days when quality control failed and recalibration was required to obtain successful quality control results. The findings included: 1. A review of the laboratory's Siemens EXL 200 quality control records from July 2025 and August 2025 identified the following days when quality control failed and the laboratory recalibrated the system, thus remediation of patients tested since the last successful quality control run was required. a) Test: Thyroid stimulating hormone Date: 7/23 /2025 Level 3 failed b) Test: Phosphorus Date: 8/11/2025 Level 1 failed c) Test: Sodium Date: 8/11/2025 Level 1 failed 2. A review of patient test records from July 22, 2025, August 5, 2025 and August 8, 2025 identified the following patient results which required remediation: a) 7/22/2025 ID: 250722005 b) 8/05/2025 ID: 25080513 c) 08/08/2025 ID: 250808001 ID: 250808003 ID: 250808004 ID: 250808005 ID: 250808006 ID: 250808007 3. Testing personnel number 1 (as listed on Form CMS 209) confirmed the findings in an interview conducted on 09/30/2025 at 1130 hours in the office.
D5785	CORRECTIVE ACTIONS CFR(s): 493.1282(b)(3) (b)(3) The criteria for proper storage of reagents and specimens, as specified under 493.1252(b), are not met. This STANDARD is not met as evidenced by: Based on review of the laboratory's Siemens EXL 200 cuvette temperature records from September 2024, and staff interview, the laboratory failed to have documentation of performing corrective actions when the documented cuvette temperature was outside the manufacturer's required range on 11 of 20 test days. The findings included: 1. A review of the laboratory's Siemens EXL 200 cuvette temperature records from September 2024 determined the manufacturer defined an acceptable range for the temperature of 36.8 - 37.2 C. 2. Further review of the records identified the following days where the documented temperature was outside the manufacturer's acceptable range: Date Temperature 9/5 36.7 C 9/6 36.7 C 9/9 36.7 C 9 /10 36.7 C 9/11 36.7 C 9/13 36.7 C 9/16 36.7 C 9/18 36.7 C 9/20 36.7 C 9/24 36.7 C 9 /26 36.7 C 3. Testing personnel number 1 (as listed on Form CMS 209) confirmed the findings in an interview conducted on 09/30/2025 at 1100 hours in the office.