

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 46D2071112	(X3) Date Survey Completed 11/04/2019
Name of Provider or Supplier Mckay Dee Anticoagulation Clinic	Street Address, City, State 4421 Harrison Blvd Suite A-12, Ogden, UT	
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
D5805	<p>TEST REPORT CFR(s): 493.1291(c)</p> <p>The test report must indicate the following: (c)(1) For positive patient identification, either the patient's name and identification number, or a unique patient identifier and identification number. (c)(2) The name and address of the laboratory location where the test was performed. (c)(3) The test report date. (c)(4) The test performed. (c)(5) Specimen source, when appropriate. (c)(6) The test result and, if applicable, the units of measurement or interpretation, or both. (c)(7) Any information regarding the condition and disposition of specimens that do not meet the laboratory's criteria for acceptability.</p> <p>This STANDARD is not met as evidenced by: Based on test reports review and confirmation by the technical consultant, the laboratory test report failed to include the location where coagulation testing was performed for 3 of 4 electronic test reports reviewed. Findings include: 1. Test reports review included documentation prothrombin time and International Normalized Ratio test results were performed at McKay Dee Hospital for test 1208694313 on 11/20 /2017; for 1214712619 on 06/29/2018, for 1200448756 on 05/072019. 2. In an interview with the technical consultant on 11/04/2019 at approximately 3:45 P.M. the technical consultant confirmed the electronic test report stated the tests were performed at McKay Dee Hospital instead of McKay Dee Anticoagulation Clinic.</p>
D6033	<p>TECHNICAL CONSULTANT-MODERATE COMPEXITY CFR(s): 493.1409</p> <p>The laboratory must have a technical consultant who meets the qualification requirements of 493.1411 of this subpart and provides technical oversight in accordance with 493.1413 of this subpart.</p>

This CONDITION is not met as evidenced by:

Based on competency evaluations review for moderate complexity testing personnel for one of two years of evaluations reviewed and confirmation by the current technical consultant, it could not be determined testing personnel evaluations were performed by a qualified technical consultant in 2018 for five of seven testing personnel reviewed. Findings include: 1. Competency evaluations review included documentation the facility supervisor performed moderate complexity testing personnel competency evaluations in 2018 for testing personnel B, C, D, E, and G. 2. In an interview conducted on 11/04/2019 at approximately 3:30 P.M. the current technical consultant confirmed the qualifications for the testing person performing competency evaluations were uncertain to qualify as a moderate complexity technical consultant.