

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 51D0694471	(X3) Date Survey Completed 03/06/2018
Name of Provider or Supplier Cabin Creek Health Center	Street Address, City, State 5722 Cabin Creek Road, Dawes, WV	
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
D5217	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1)</p> <p>At least twice annually, the laboratory must verify the accuracy of any test or procedure it performs that is not included in subpart I of this part.</p> <p>This STANDARD is not met as evidenced by: Based on review of the laboratory's proficiency testing records and interview with the Laboratory Director (LD), the laboratory failed to perform twice annual verification of accuracy of the KOH and Wet prep procedures from November 2016 to March 2018. The findings include: 1. Review of the laboratory's records from November 2016 until March 2018 identified no documentation of twice annual verification of accuracy of the KOH and Wet prep procedures performed in the laboratory. 2. On 3/6/18 at approximately 10:20 AM, the LD confirmed the findings.</p>
D5449	<p>CONTROL PROCEDURES CFR(s): 493.1256(d)(3)(ii)(g)</p> <p>Unless CMS Approves a procedure, specified in Appendix C of the State Operations Manual (CMS Pub. 7), that provides equivalent quality testing, the laboratory must-- At least once a day patient specimens are assayed or examined perform the following for-- Each qualitative procedure, include a negative and positive control material; (g) The laboratory must document all control procedures performed.</p> <p>This STANDARD is not met as evidenced by: Based on review of the laboratory's quality control records, "KOH/Wet Prep Log" and interview with the Laboratory Director (LD), the laboratory failed to perform a positive and negative control each day of patient testing for KOH/Wet Prep procedures. Record review was from November 2016 until March 2018. The findings</p>

include: 1. Review of the laboratory's "KOH/Wet Prep Log" November 2016 to March 2018 identified KOH and Wet Prep patient testing performed on 3/21/17, 6/27/17, and 6/29/17. 2. Review of the laboratory's quality control records from November 2016 to March 2018 identified no quality control performed for KOH and Wet Prep testing. 3. On 3/6/18 at approximately 11:30 AM, the LD confirmed the findings.