Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 51D0707042	(X3) Date Survey Completed 07/17/2019
Name of Provider or Supplier Grant Memorial Hospital Respiratory	**Street Address, City, State** 117 Hospital Drive, Petersburg, 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
D2094	ROUTINE CHEMISTRY CFR(s): 493.841(e) (1) For any unsatisfactory analyte or test performance or testing event for reasons other than a failure to participate, the laboratory must undertake appropriate training and employ the technical assistance necessary to correct problems associated with a proficiency testing failure. (2) For any unacceptable analyte or testing event score, remedial action must be taken and documented, and the documentation must be maintained by the laboratory for two years from the date of participation in the proficiency testing event. This STANDARD is not met as evidenced by: Based on review of Proficiency Testing (PT) records and an interview with Testing Personnel 1 (TP1), the laboratory failed to take and document remedial action for unacceptable analyte scores in the College of American Pathologists (CAP) 3rd testing event of 2018. Findings: 1. A review of the 3rd testing event AQ-C of 2018 records revealed that no documentation of an investigation or remedial action regarding the unsuccessful analytes occurred. Specimen AQ-12 had unacceptable results for PH, PCO2, and PO2. 2. An interview with TP1, 7/17/19 at approximately 917 AM, confirmed that the CAP survey AQ-C 2018 had no investigation of unsuccessful analyte results and no remedial action was taken. 3. This is a repeat deficiency. On 5/02/17, the laboratory was cited the same D-Tag 2094. The Plan of Correction submitted for that deficiency stated that "all results would be reviewed within a week" and that "appropriate action will be taken to investigate any problems."