

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 53D0679889	(X3) Date Survey Completed 08/18/2026
Name of Provider or Supplier Wyoming State Hospital Laboratory	Street Address, City, State 831 Highway 150 South #733b, Evanston, WY	
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
D5215	EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(b)(2) The laboratory must verify the accuracy of any analyte, specialty or subspecialty assigned a proficiency testing score that does not reflect laboratory test performance (that is, when the proficiency testing program does not obtain the agreement required for scoring as specified in subpart I of this part, or the laboratory receives a zero score for nonparticipation, or late return or results). This STANDARD is not met as evidenced by: Based on review of proficiency testing records, policy and procedure review, and staff interview, the laboratory failed to have a system in place for reviewing proficiency testing results that received an artificial score of 100% for 4 out of 29 API (American Proficiency Institute) and CAP (College of American Pathologists) proficiency testing events reviewed from July 2024 through July 2026. The findings were: 1. Review of the 2024 API Hematology event #2 comparative evaluation report showed the laboratory received an artificial score of 100% for the microscopic vaginal wet preparation challenge. Further review of the comparative evaluation report showed sample VA-02 was not graded due to "no consensus" and the laboratory was directed to "See Data Summary." There was no documentation the laboratory had performed a self-evaluation. 2. Review of the 2025 API Microbiology event #1 comparative evaluation report showed the laboratory received an artificial score of 100% for the molecular detection of parainfluenza virus. Further review of the comparative evaluation report showed sample RSV-04 was not graded due to "no appropriate peer group" and the laboratory was directed to "See Data Summary." There was no documentation the laboratory had performed a self-evaluation. 3. Review of the 2025 API Chemistry Core event #3 comparative evaluation report showed the laboratory received an artificial score of 100% on the analyte of measured LDL (low-density lipoprotein) cholesterol. Further review of the comparative evaluation report showed sample CH-11 and CH-13 were not graded due to "no consensus". There was no

documentation the laboratory had performed a self-evaluation. 4. Review of the 2026 CAP Toxicology event #1 comparative evaluation report showed the laboratory received an artificial score of 100% on the analyte of clozapine. Further review of the comparative evaluation report showed sample ZE-03 was not graded due to "result is outside the method/instrument range." There was no documentation the laboratory had performed a self-evaluation. 5. Interview with the technical consultant on 8/18/26 at 11:45 AM confirmed no further documentation was available. 6. Review of the policy "Proficiency Testing", last reviewed by the laboratory director on 5/10/24, showed "... Any discrepancy or failure of a PT sample must be evaluated and investigated. Remedial actions are then taken to prevent recurrence. These may include policy and /or procedural changes. The accuracy of patient testing must also be evaluated to ensure accuracy and precision of reported results..."