

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 07/03/2017
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 52D0397477	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 03/29/2017
NAME OF PROVIDER OR SUPPLIER PLANNED PARENTHOOD OF WISCONSIN INC			STREET ADDRESS, CITY, STATE, ZIP CODE 302 N JACKSON ST MILWAUKEE, WI 53202		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE	
D2009	493.801(b)(1) TESTING OF PROFICIENCY TESTING SAMPLES The individual testing or examining the samples and the laboratory director must attest to the routine integration of the samples into the patient workload using the laboratory's routine methods. This STANDARD is not met as evidenced by: Based on surveyor review of proficiency testing (PT) records from the Madison location of the laboratory and interview with the technical consultant, the laboratory director has not attested to the routine integration of the PT samples into the patient workload using the laboratory's routine methods. Findings include: 1. Review of PT records for 2016 show the attestation statements for the Madison location of the laboratory have not been signed by the laboratory director. 2. Interview with the technical consultant on March 29, 2017 at 1:45 PM confirmed the signature on the attestation forms is not that of the laboratory director or the technical consultant.	D2009		6/21/17	
D5403	493.1251(b) PROCEDURE MANUAL	D5403		6/21/17	
510M	The procedure manual must include the following when applicable to the test procedure: (1) Requirements for patient preparation; specimen collection, labeling, storage, preservation, transportation, processing, and referral; and criteria for specimen acceptability and rejection as described in §493.1242. (2) Microscopic examination, including the detection of inadequately prepared slides. (3) Step-by-step performance of the procedure, including test calculations and interpretation of results.				

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

06/21/2017

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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D5403	<p>Continued From page 1</p> <p>(4) Preparation of slides, solutions, calibrators, controls, reagents, stains, and other materials used in testing.</p> <p>(5) Calibration and calibration verification procedures.</p> <p>(6) The reportable range for test results for the test system as established or verified in §493.1253.</p> <p>(7) Control procedures.</p> <p>(8) Corrective action to take when calibration or control results fail to meet the laboratory's criteria for acceptability.</p> <p>(9) Limitations in the test methodology, including interfering substances.</p> <p>(10) Reference intervals (normal values).</p> <p>(11) Imminently life-threatening test results, or panic or alert values.</p> <p>(12) Pertinent literature references.</p> <p>(13) The laboratory's system for entering results in the patient record and reporting patient results including, when appropriate, the protocol for reporting imminently life threatening results, or panic, or alert values.</p> <p>(14) Description of the course of action to take if a test system becomes inoperable.</p> <p>This STANDARD is not met as evidenced by: Based on surveyor review of the manufacturer's instructions and the procedure for Eldon Card RhD (Rhesus D antigen), and interview with the technical consultant, the laboratory procedure does not include the manufacturer's instructions to not open the storage bag for the Eldon Cards (EldonBag) at less than 64 degrees Fahrenheit.</p> <p>Findings include: 1. The manufacturer's instructions state the EldonBag should not be opened if the temperature is below 64 degrees Fahrenheit.</p>	D5403			

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D5403	Continued From page 2	D5403			
D5413	<p>2. Review of the Eldon Card RhD procedure shows no restrictions for opening the EldonBag.</p> <p>3. Interview with the technical consultant on March 29, 2017 at 2:45 PM confirms the procedure does not include the manufacturer's restrictions for opening the EldonBag.</p> <p>493.1252(b) TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT</p> <p>The laboratory must define criteria for those conditions that are essential for proper storage of reagents and specimens, accurate and reliable test system operation, and test result reporting. The criteria must be consistent with the manufacturer's instructions, if provided. These conditions must be monitored and documented and, if applicable, include the following:</p> <p>(1) Water quality. (2) Temperature. (3) Humidity. (4) Protection of equipment and instruments from fluctuations and interruptions in electrical current that adversely affect patient test results and test reports.</p> <p>This STANDARD is not met as evidenced by: Based on surveyor review of the manufacturer instructions and laboratory records, and interview with the technical consultant, the laboratory does not document the room temperature to ensure storage requirements for Eldon RhD (Rhesus D Antigen) test are met.</p> <p>Findings include: 1. The manufacturer's instructions for the Eldon RhD cards include directions to store the cards between 41 - 99 degrees Fahrenheit and not to</p>	D5413		6/21/17	
510M					

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D5413	Continued From page 3 open the EldonBag if the temperature is below 64 degrees Fahrenheit. 2. Review of laboratory records shows no documented room temperature records for the laboratory. 3. Interview with the technical consultant on March 29, 2017 at 2:45 PM confirmed room temperatures are not documented in the area where Eldon Cards are stored and used.	D5413		