Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	01D0300027	03/13/2025
Name of Provider or Supplier	**Street Address, City, State**	
Bibb Medical Center	208 Pierson Avenue, Centreville, AL	

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
D5400	ANALYTIC SYSTEMS CFR(s): 493.1250 Each laboratory that performs nonwaived testing must meet the applicable analytic systems requirements in 493.1251 through 493.1283, unless HHS approves a procedure, specified in Appendix C of the State Operations Manual (CMS Pub.7), that provides equivalent quality testing. The laboratory must monitor and evaluate the overall quality of the analytic systems and correct identified problems as specified in 493.1289 for each specialty and subspecialty of testing performed. This CONDITION is not met as evidenced by: Based on reviews of the Abbott i-STAT Respiratory analyzer records and interviews with the General Supervisor, the laboratory failed to ensure: A) Documentation of internal Electronic Simulator checks. (Refer to D5431). B) Documentation of Calibration Verification. (Refer to D5439). C) Documentation of Quality Controls. (Refer to D5481).