Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	01D0964738	08/04/2026
Name of Provider or Supplier	**Street Address, City, State**	
Winfield Neurology Family Medicine	125 Bob Lawrence Drive, Winfield, 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
D2096	ROUTINE CHEMISTRY CFR(s): 493.841(f) (f) Failure to achieve satisfactory performance for the same analyte or test in two consecutive testing events or two out of three consecutive testing events is unsuccessful performance. This STANDARD is not met as evidenced by: Based on a review of proficiency testing (PT) results from the American Proficiency Institute (API), an interview with the Technical consultant (TC), Testing personnel (TP) #1 and #2, the laboratory failed to successfully participate (achieve scores of 80% or greater) in proficiency testing for urine creatinine. The laboratory failed two PT events in 2024 and 2025, resulting in an initial unsuccessful proficiency testing performance. The findings include: 1. A review of the API PT results revealed failing scores for UC in two PT events, as follows: a) 2024 Survey - Chemistry Miscellaneous Event 2: 67% UC b) 2025 Survey - Chemistry Miscellaneous Event 1: 67% UC 2. The above findings were confirmed during an interview with the TC, TP#1, and TP#2 on 8/4/26 at 3:00pm.
D5429	MAINTENANCE AND FUNCTION CHECKS CFR(s): 493.1254(a)(1) (a)(1) Maintenance as defined by the manufacturer and with at least the frequency specified by the manufacturer. This STANDARD is not met as evidenced by: Based on surveyor review of maintenance records for the Horiba Hematology analyzer, and an interview with the technical consultant (TC) and Testing personnel (TP) #1, the laboratory failed to document weekly maintenance for the Horiba

	hematology analyzer. This was noted for 25 out of 25 months reviewed in 2024 through 2026. The findings include: 1. A review of maintenance records revealed no documentation for the following months: a) July 2024 to December 2024; 6 months, b) January 2025 to December 2025; 12 months, c) January 2026 to July 2026; 7 months. 2. The above findings were confirmed during an interview with the TC and TP #1 8/4/26 at 1:00pm
D5481	CONTROL PROCEDURES CFR(s): 493.1256(f)(g) (f) Results of control materials must meet the laboratorys and, as applicable, the manufacturers test system criteria for acceptability before reporting patient test results. (g) The laboratory must document all control procedures performed. This STANDARD is not met as evidenced by: Based on a review of the Hematology quality control (QC) records, patient logs, and an interview with the Technical Consultant (TC), Testing personnel (TP) #1, and TP #2, the laboratory failed to ensure at least two levels of QC were run and acceptable, prior to analyzing patient specimens and reporting the results. This was noted for 8 out of 30 days in November 2024. The findings include: 1. A review of the QC records for the Horiba Hematology analyzer revealed that the following dates QC were out prior to patient testing in November 2024. a) November 8, 10, 11, and 18 - 3 levels out b) November 9, 12, 14, 15 - 2 levels out 2. A total of 78 patients were affected. a) 12 patients were affected for November 8. b) 10 patients were affected for November 9. c) 10 patients were affected for November 10. d) 2 patients were affected for November 11. e) 19 patients were affected for November 12. f) 8 patients were affected for November 14. g) 17 patients were affected for November 15. h) No patients were run on November 18. 3. The above findings were confirmed in an interview with TC, TP#1, and TP#2 on 8/4/26 at 1400.