Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	01D2074395	05/23/2018
Name of Provider or Supplier	**Street Address, City, State**	
Quick Care Urgent	202 Governors Drive, Huntsville, 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
D5203	SPECIMEN IDENTIFICATION AND INTEGRITY CFR(s): 493.1232 The laboratory must establish and follow written policies and procedures that ensure positive identification and optimum integrity of a patient's specimen from the time of collection or receipt of the specimen through completion of testing and reporting of results. This STANDARD is not met as evidenced by: Based on observations, a review of the facility policies, and interviews with Testing Personnel (TP) #3 and #6, the laboratory failed to ensure Hematology specimens were labeled with two patient identifiers. Two of two patient samples observed were not labeled as per laboratory policy. The findings include: 1. During the initial laboratory tour with the Practice Manager on 5/23/2018 at 9:15 AM, the surveyor observed one purple-top tube with only a birth date in the rack next to the Hematology analyzer. A few minutes later the surveyor observed a second purple-top tube in the open sample holder on the analyzer. This sample had only a birth date hand-written on the label. The surveyor then asked TP #3 if the two samples were patient CBCs (Complete Blood Counts), and if they were properly labeled. TP #3 confirmed they were patient samples, and the labeling was not complete; then TP #3 looked in the Aprima electronic medical record system, and hand-wrote the patients' names on the two tubes. 2. As the entrance tour and interview continued at approximately 9:30 AM, TP #6 (the collector of the two CBC specimens) returned to the laboratory. The surveyor asked if he had properly labeled the two CBC samples he had drawn. TP #6 confirmed he had not, and stated he should label all samples with the patient's name, date of birth (DOB) and the date. 3. A review of the laboratory's policy entitled "VENIPUNCTURE AND SPECIMEN IDENTIFICATION POLICY", revealed under "Specimen Identification / Labeling Specimens must be labeled properly to ensure proper results. Each specimen label should include the following information: 1. The date specimen was collected 2. Patient name (Last, First) 3. Specimen ID (DOB)..." 4.

	During the exit summation on 5/23/2018 at 3:45 PM, this concern was discussed and confirmed with the Practice Manager and TP #1. .
D5417	TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(d) Reagents, solutions, culture media, control materials, calibration materials, and other supplies must not be used when they have exceeded their expiration date, have deteriorated, or are of substandard quality. This STANDARD is not met as evidenced by: Based on a review of the 2017 Beckman Coulter AcT diff Hematology analyzer calibration records and an interview with the Practice Manager, the laboratory failed to ensure the November 2017 calibrator was used before its expiration date. This was observed on one of two 2017 calibrations reviewed. The findings include: 1. A review of records for the AcT diff Hematology analyzer, revealed a calibration was performed on 5/02/2017, and on 11/30/2017, using S-CAL Calibrator lot number 4728 with an expiry date of 11/11/2017. A note on the 11/30/2017 calibration records indicated the Laboratory Director had discovered the use of the expired calibrator, and had counseled the testing personnel. [This notation was not dated.] 2. During an interview on 5/23/2018 at 12:05 PM, the surveyor asked the Practice Manager when Laboratory Director had discovered this problem. After sending a text message to the Director, the Manager answered, "Yesterday" (5/22/2018). When asked if another valid calibration had been performed since the 5/02/2017 calibration, the Practice Manager answered no, stating they had not ordered a new calibrator until this week. Thus, the above noted findings were confirmed. SURVEYOR:Laura T. Williams, BS, MT (ASCP)Licensure and Certification Surveyor