

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 01D2257031	(X3) Date Survey Completed 10/17/2023
Name of Provider or Supplier Alabama Center For Reproductive Medicine, Pllc	Street Address, City, State 7209 Copperfield Dr, Montgomery, 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
D2009	<p>TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(1)</p> <p>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.</p> <p>This STANDARD is not met as evidenced by: Based on a review of Proficiency Testing (PT) records and an interview with Testing Personnel #1, the Laboratory Director failed to sign the attestation statement provided by American Association of Bioanalyst (AAB). This was noted for two out of two events reviewed from the start of patient testing, August 2022, to the date of the current survey, October 17, 2023. The findings include: 1. A review of PT records revealed attestation statements with no evidence of signatures by the Laboratory Director for Event S2 2022 or Event S1 2023. 2. During an interview on 10/17/2023 at 2:00 PM, Testing Personnel #1 confirmed the above findings.</p>