

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 03D1085153	(X3) Date Survey Completed 02/10/2022
Name of Provider or Supplier Dr Liz Cruz Partners In Digestive Health	Street Address, City, State 4110 N 108th Ave, Ste 105, Phoenix, AZ	
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
D5217	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1)</p> <p>At least twice annually, the laboratory must verify the accuracy of any test or procedure it performs that is not included in subpart I of this part.</p> <p>This STANDARD is not met as evidenced by: Based on lack of accuracy verification documentation for review and interview with the facility personnel, the laboratory failed to verify the accuracy of testing performed under the sub-specialty of Histopathology at least twice annually during 2020. Findings include: 1. No documentation was presented for review during the survey conducted on February 10, 2022 to indicate the laboratory verified the accuracy of the microscopic interpretation (reading) of histopathology specimens at least twice annually during 2020. 3. The facility personnel confirmed that the laboratory failed to verify the accuracy of histopathology testing at least twice annually during 2020. 3. The laboratory's approximate annual test volume under the sub-specialty of Histopathology is 2,100. The laboratory began patient testing on April 1, 2020.</p>