

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 03D2179254	(X3) Date Survey Completed 08/03/2022
Name of Provider or Supplier Arizona Center For Pain Relief	Street Address, City, State 2745 S Alma School Rd Ste M6, Chandler, 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 Toxicology at least twice annually. Findings include: 1. The laboratory began patient testing on 3/03/2020. The laboratory performs a urine drug screen test on the Sciex 4000 Q Trap LC/MS/MS analyzer and a urine drug confirmation test on the Sciex API4000 LC/MS analyzer, with an approximate annual test volume of 119,790. 2. During the survey conducted on August 3, 2022, no documentation was presented for review to indicate the laboratory verified the accuracy of the urine screen test and the urine confirmation test at least twice annually from March 3, 2020 through August 30, 2021. 3. At 10:55am on 08/03/2022, the facility personnel interviewed confirmed the laboratory failed to verify the accuracy of the urine drug screen and confirmation testing at least twice annually during the time period indicated above.</p>
D5785	<p>CORRECTIVE ACTIONS CFR(s): 493.1282(b)(3)</p> <p>(b) The laboratory must document all corrective actions taken, including actions taken when any of the following occur: (b)(3) The criteria for proper storage of reagents and specimens, as specified under 493.1252(b), are not met.</p> <p>This STANDARD is not met as evidenced by:</p>

Based on review of patient test reports and interview with the technical supervisor, the laboratory failed to provide documented corrective actions for test results that were reported for specimens tested outside the laboratory's specimen stability requirements. Findings include: 1. The laboratory began patient testing on 3/03/2020. The laboratory performs a urine drug screen test on the Sciex 4000 Q Trap LC/MS/MS analyzer and a urine drug confirmation test on the Sciex API4000 LC/MS analyzer, with an approximate annual test volume of 119,790. 2. The laboratory's established policy, 'Urine Collections for Toxicology Testing: Toxicology' states, "Reminder: Specimen is only stable for 3 days at room temperature and 7 days at refrigerator temperature for testing to occur." 3. Patient test report (Accession# 10176) reviewed during the survey indicated the specimen was collected on 11/23/2020, received in the laboratory on 12/08/2020 and tested by the laboratory on 12/09/2020. A total of 17 days lapsed between the time of collection and the time of testing. 4. No documented corrective action was presented for review pertaining to the specimen indicated above, which was tested past the laboratory's established testing timeframe. 5. The technical supervisor confirmed that the laboratory failed to document corrective action for the specimen indicated above which was not tested within the laboratory's established timeframe.