Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	04D0678110	07/13/2018
Name of Provider or Supplier	**Street Address, City, State**	
Hilman Family Clinic, Pa	12 Medical Lane, Conway, AR	

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
D3037	RETENTION REQUIREMENTS CFR(s): 493.1105(a)(4) Proficiency testing records. Retain all proficiency testing records for at least 2 years. This STANDARD is not met as evidenced by: . Through a review of proficiency records for 2018 and 2017, lack of documentation, as well as interview with staff, it was determined the laboratory failed to retain proficiency testing documentation for at least 2 years. A. Upon request the laboratory failed to have completed submission forms, signed attestation statements, instrument printouts or graded reports for the second, and third proficiency testing events of 2017 (2 of 3 proficiency testing events). B. In an interview on 5/23/2018 at 10:30, the technical consultant (as listed on form CMS 209) confirmed the lack of documentation and that the laboratory had not retained the records for the second and third proficiency testing events of 2017.
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: . Through observations made during a tour of the laboratory, lack of documentation, and interviews with staff, it was determined the laboratory failed to assign a unique identifier (patient date of birth or account number) to twenty-three of twenty-three patient's specimens observed. As evidenced by: A. During a tour of the laboratory on 7

	/13/2018 at 1130, the surveyor observed eleven of eleven red top vacutainer tubes and twelve of twelve purple top vacutainer tubes with the patient's first and last name only with no unique patient identifier (patient's date of birth or account number). B. In an interview at 1145 on 7/13/2018, laboratory personnel #3 (as listed on form CMS 209) confirmed the laboratory does not use a unique identifier to label patient samples.