Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	04D1101488	03/15/2018
Name of Provider or Supplier	**Street Address, City, State**	
Central Arkansas Gastroenterology	212 Natural Resources Drive, Little Rock, 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
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: Through observation and interview it was determined supplies that had exceeded their date of expiration were available for use. Findings follow: A. During a tour of the laboratory on 03/15/18 at approximately 11:00 AM, one of one bottle of Hydrochloric Acid lot number 9307 with an expiration date of November 2011 and one of one bottle of buffered formalin lot number 263451 and an expiration date of July 2017 was observed in the flammables storage cabinet. B. In an interview 0n 03/15/18 at approximately 11:00 AM the testing personnel identified as number 1 on the CMS 209 form confirmed that the chemicals had exceeded their expiration date and were available for use.
D6107	LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(15) The laboratory director must specify, in writing, the responsibilities and duties of each consultant and each supervisor, as well as each person engaged in the performance of the preanalytic, analytic, and postanalytic phases of testing, that identifies which examinations and procedures each individual is authorized to perform, whether supervision is required for specimen processing, test performance or result reporting and whether supervisory or director review is required prior to reporting patient test results.

	This STANDARD is not met as evidenced by: Based upon review of personnel records, lack of documentation, and interview it was determined that the laboratory director failed to specify in writing the examinations and procedures that personnel are authorized to perform for none of one testing personnel identified on the CMS 209 form. Findings follow: A. Upon review, personnel files for testing personnel identified as numbers one on the CMS 209 form did not contain written authorization by the laboratory director to perform procedures and examinations. B. Upon request, the laboratory was unable to provide written authorization by the laboratory director to perform procedures and examinations for testing personnel identified as number one on the CMS 209 form. C. In an interview on March 15, 2018 at approximately 1030, the testing personnel identified as number 1 on the CMS 209 form confirmed that no written authorization to perform procedures or examinations was present and indicated a lack of knowledge of the requirement.