Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	04D2226039	10/28/2025
Name of Provider or Supplier	**Street Address, City, State**	
Quest Diagnostics - Fort Smith Rrl	6801 Rogers Ave, 1st Floor Lab, Fort Smith, 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) (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: Based on observation and interview with laboratory staff, the laboratory had supplies available for use after their expiration date. Findings follow: A) During a tour of the laboratory on 10/28/25 at 4:07pm, one (of one) containers of "Finntip 1000 Sterile" (Thermo Scientific, lot: 19002U0, Cat: 9401113, expiration date 01/24) were observed in the laboratory, available for use beyond the expiraton date. C) In an interview on 10/28/25 at 4:07pm laboratory director confirmed that the items, identified above, had exceeded their expiration date and were available for use in the laboratory.
D6032	LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1407(e)(14) (e)(14) Specify, in writing, the responsibilities and duties of each consultant and 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 results reporting, and whether consultant or director review is required prior to reporting patient test results. This STANDARD is not met as evidenced by: Based on review of personnel files for all personnel listed on the CMS-209 form, lack

	of documentation, and interviews with laboratory staff, the laboratory director failed to authorize three (of three) testing personnel to perform tests and report results without direct supervision. Survey findings include: A) During a review of personnel files for all personnel, TP-1, TP-2, and TP- 3 (as listed on the form CMS-209) failed to have written authorization from the laboratory director for testing personnel responsibilities and duties without direct supervision. B) In an interview on 10/28 /2025 at 1:14 pm, the laboratory director confirmed the lack of written authorization for the above testing personnel.