Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	05D2007503	12/06/2018
Name of Provider or Supplier	**Street Address, City, State**	
S.C. Pathology Services	22214 Evening Star Ct, Santa Clarita, CA	

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
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: Based on review of patient pathology slides, patient final testing reports (medical record (MR), slide labeling, and interview with the laboratory director, it was determined that from 05/17/2017 through 11/30/2018 for one (1) out of nine (9) random patient testing records reviewed, the laboratory failed to follow written policies and procedures for specimen collection, labeling and biopsy reports for each biopsy specimen. The findings included: a. Review of patient pathology biopsy slides found that the unique slide identifier (patient name) found on the slides FNA18-168 (H&E) did not match the unique slide identifier found on Slides FNA18-168 CD30 and CD15 Immunohistochemistry (IHC) stain slides. b. On 12/06/2018 11:30 AM (survey date), the laboratory director confirmed that the unique identifier (patient name) found on the pathology biopsy slides did not match. c. Based on the laboratory's annual test volume declaration (12/06/2018) the laboratory performed 600 Histopathology patients' testing.