Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	05D2217603	06/15/2026
Name of Provider or Supplier	**Street Address, City, State**	
Exer Medical Corporation	7077 Willoughby Ave Ste 3, Los Angeles, 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
D2121	HEMATOLOGY CFR(s): 493.851(a) (a) Failure to attain a score of at least 80 percent of acceptable responses for each analyte in each testing event is unsatisfactory analyte performance for the testing event. This STANDARD is not met as evidenced by: Based on the surveyor's review of the American Proficiency Institute (API) proficiency testing (PT) records and interviews with the technical consultant (TC) and testing personnel (TP), the laboratory failed to attain at least 80 percent of the acceptable response from two out of five testing samples for the third event of the Hematology PT event in 2025 (Q3-2025). The findings include: 1. The laboratory is enrolled in the API - PT program and received an unsatisfactory score of 60% for the Hematocrit analyte for Q3-2025 as follows: Sample Reported Expected Performance HEM-11 42 39.1 - 42.5 Acceptable HEM-12 51.9 46.9 - 50.9 Unacceptable HEM-13 34.1 32.2 - 35.0 Acceptable HEM-14 48.6 43.9 - 47.7 Unacceptable HEM-15 16.9 15.6 - 17.0 Acceptable 2. The TC and TP affirmed by interviews on June 15, 2026, at approximately 12:15 p.m. that the laboratory obtained the PT unsatisfactory scores as mentioned in statement #1. 3. According to the laboratory testing declaration submitted on the day of the survey, the laboratory performed approximately 1,500 Hematology patient samples annually that included the Hematocrit analyte.
D6007	LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1407(e)(1) (e) The laboratory director must-- (e)(1) Ensure that testing systems developed and used for each of the tests performed in the laboratory provide quality laboratory services for all aspects of test performance, which includes the preanalytic, analytic, and postanalytic phases of testing;

	This STANDARD is not met as evidenced by: The laboratory director is herein cited for deficient practice in ensuring that systems for the preanalytic, analytic, and postanalytic phases of the laboratory were monitored and followed. Findings include: The laboratory received an unsatisfactory performance score for Hematology of 60%. See D2122