

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 10D0273114	(X3) Date Survey Completed 01/24/2018
Name of Provider or Supplier Cfp Physicians Group	Street Address, City, State 985 Sr 436, Casselberry, FL	
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
D5435	<p>MAINTENANCE AND FUNCTION CHECKS CFR(s): 493.1254(b)(2)</p> <p>For equipment, instruments, or test systems developed in-house, commercially available and modified by the laboratory, or maintenance and function check protocols are not provided by the manufacturer, the laboratory must: (i) Define a function check protocol that ensures equipment, instrument, and test system performance that is necessary for accurate and reliable test results and test result reporting. (ii) Perform and document the function checks, including background or baseline checks, specified in paragraph (b)(2)(i) of this section. Function checks must be within the laboratory's established limits before patient testing is conducted.</p> <p>This STANDARD is not met as evidenced by: Based on examination and interview with Testing Personnel A, the laboratory failed to perform function checks on four out of four timers used in the laboratory from 1-24-16 through 1-24-18. Findings included: During a tour of the laboratory on 1-24-18 at 2:35 PM revealed that four out of four timers were out of calibration. Timer #1 was due for calibration on 2-1-08 Timer #2 was due for calibration on 11-28-09 Timer #3 was due for calibration on 6-20-09 Timer #4 was due for calibration on 8-4-12 During an interview on 1-24-18 at 2:35 PM, Testing Personnel A confirmed that the timers had not been calibrated.</p>