

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 10D0287315	(X3) Date Survey Completed 06/17/2022
Name of Provider or Supplier Sawgrass Pediatric Partners Llc	Street Address, City, State 9801 Glades Rd, Boca Raton, 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
D0000	A recertification survey was completed on 6/17/2022 at Sawgrass Pediatric Partners LLC. The laboratory was not in compliance 42 CFR Part 493, Requirements for Laboratories.
D3031	<p>RETENTION REQUIREMENTS CFR(s): 493.1105(a)(3)</p> <p>Analytic systems records. Retain quality control and patient test records (including instrument printouts, if applicable) and records documenting all analytic systems activities specified in 493.1252 through 493.1289 for at least 2 years.</p> <p>This STANDARD is not met as evidenced by: Based on record review and interview, the laboratory failed to have quality control records and patient log records for Strep thorat cultures in 2021 available onsite during the time of survey. Findings included: Reeviw of Strep thorat culture revealed no documentation of controls and patient logs available in 2021 onsite. During an interview on 6/17/2022 at 11:00 AM with the supervisor, she confirmed that the 2021 Strep throat culture log with quaility conrtol and patient records could not be located onsite at the time.</p>