

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 10D0870249	(X3) Date Survey Completed 04/08/2025
Name of Provider or Supplier David A Sigalow Md Pa	Street Address, City, State 215 Ne 19th Dr, Okeechobee, 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	An announced CLIA recertification survey was conducted at David A Sigalow MD PA on April 8, 2025. The laboratory was not in compliance with 42 CFR Part 493, Requirements for Laboratories. The following is a description of the standard level deficiencies:
D5217	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1)</p> <p>At least twice annually, the laboratory must verify the accuracy of any test or procedure it performs that is not included in subpart I of this part.</p> <p>This STANDARD is not met as evidenced by: Based on review of the proficiency testing (PT) records, and interview, the laboratory failed to verify the accuracy for urine colony counts for 2024. Findings: Review of the College of American Pathologist PT records revealed there was no documentation of PT for 2024. During an interview on 04/08/2024 at 2:00 PM, the Laboratory Director stated the PT renewal email went to the email address of a former employee and they failed to renew the PT for 2024.</p>