

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  10D0928464	<b>(X3) Date Survey Completed</b>  03/25/2021
<b>Name of Provider or Supplier</b>  Terrence A Cronin Jr Md	<b>Street Address, City, State</b>  1399 S Harbor City Blvd, Melbourne, FL	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D0000</b>	A recertification survey was conducted on March 25, 2021. Terrence A Cronin Jr MD clinical laboratory was not in compliance with 42 CFR 493, requirements for clinical laboratories.
<b>D3031</b>	<p><b>RETENTION REQUIREMENTS</b> 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 retain Quality Control (QC) records for the histopathology laboratory from 03/25/2019 to 07/09/2021. Findings: Review of the laboratory's QC records showed the records for recording the Hematoxylin and Eosin stain maintenance and stain quality, the cryostat temperature and maintenance, the room temperature and humidity, and the reagent logs were not available for review. The Application for Certification signed and dated by the Laboratory Director on 03/24/21, noted the laboratory had an estimated annual test volume of 1,472 histopathology tests per year. During an interview on 03/25/2021 at 12:51 PM, the Laboratory Consultant stated they were unable to locate the missing logs.</p>