Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number** 10D0994171	**(X3) Date Survey Completed** 07/20/2021
Name of Provider or Supplier Baycare Medical Group, Inc	**Street Address, City, State** 620 10th St N Ste 3a, Saint Petersburg, 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 Baycare Medical Group Inc on 07/20/21. The laboratory is not in compliance with 42 CFR Part 493, Requirements for Laboratories. The following is a description of the standard level deficiencies:
D5413	TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(b) The laboratory must define criteria for those conditions that are essential for proper storage of reagents and specimens, accurate and reliable test system operation, and test result reporting. The criteria must be consistent with the manufacturer's instructions, if provided. These conditions must be monitored and documented and, if applicable, include the following: (1) Water quality. (2) Temperature. (3) Humidity. (4) Protection of equipment and instruments from fluctuations and interruptions in electrical current that adversely affect patient test results and test reports. This STANDARD is not met as evidenced by: Based on record review and interview with the Laboratory Director, the laboratory failed to record the room temperature every day that testing was performed from April 4, 2019 to the day of survey, July 20, 2021. Findings Included: Record review of the "Daily Quality Assurance/Quality Control Checklist" (QA/QC logs) revealed that the acceptable room temperature was 20-25 degrees Celsius. Review of the Daily Quality Assurance/Quality Control Checklist showed the laboratory was not documenting the room temperature from April 4, 2019 to July 20, 2021. Interview on 07/20/21 at 02:05 PM, the Laboratory Director confirmed that the laboratory had overlooked following their Plan of Correction from their laboratory's last survey that stated "Lab personnel is now documenting the room temperature..., daily, in the lab QA/QC log. This will be verified by the laboratory director and initialed daily." This is a repeat deficiency.