

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 10D1041964	(X3) Date Survey Completed 08/29/2025
Name of Provider or Supplier Pediatric Associates	Street Address, City, State 4279 Nw 88 Ave, Sunrise, 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 PEDIATRIC ASSOCIATES from 08/25/2025 to 08/29/2025. The laboratory was not in compliance with 42 CFR Part 493, Requirements for Laboratories. The following is a description of the standard level deficiencies:
D6047	<p>TECHNICAL CONSULTANT RESPONSIBILITIES CFR(s): 493.1413(b)(8)(i)</p> <p>(b)(8)(i) Direct observations of routine patient test performance, including patient preparation, if applicable, specimen handling, processing and testing;</p> <p>This STANDARD is not met as evidenced by: Based on record review and staff interview the Technical Consultant (TC) or a designee failed to observe patient testing during competency evaluation for two out of three Testing Personnel (TP) for one out of two years reviewed. Findings included: 1- Review of FORM CMS 209 signed by the Laboratory Director on 08/25/2025, revealed the following: Laboratory Director (LD) was also Clinical Consultant and Technical Consultant for Hematology and Chemistry specialties and there were 3 TP (TP#1, TP#2 and TP#3). 2-Review of personnel records revealed that six-month competency, the component of patient testing was observed by a Lead Supervisor (LS) on 06/10/2025 for TP#2 and on 07/15/2025 for TP#2. LS had no delegation letter to do competence. 3-During an interview on 08/25/2025 at 01:30 PM, the LS confirmed that the TC failed to observe patient testing observation during six month competency for TP#2 and TP#3.</p>
D6050	<p>TECHNICAL CONSULTANT RESPONSIBILITIES CFR(s): 493.1413(b)(8)(iv)</p> <p>(b)(8)(iv) Direct observation of performance of instrument maintenance and function checks;</p>

This STANDARD is not met as evidenced by:

Based on record review and staff interview the Technical Consultant (TC) or a designee failed to observe performance of instrument and function check during competency evaluation for two out of three Testing Personnel (TP) for one out of two years reviewed. Findings included: 1-Review of FORM CMS 209 signed by the Laboratory Director on 08/25/2025, revealed the following: Laboratory Director (LD) was also Clinical Consultant and Technical Consultant for Hematology and Chemistry specialties and 3 TP (TP#1, TP#2 and TP#3). 2-Review of personnel records revealed that six-month competency for TP#2 and TP#3, the component of direct observation of performance of instrument and function check was observed by a Lead Supervisor (LS) on 06/10/2025 for TP#2 and for TP#3 was observed on 07/15/2025. LS had no delegation letter to do competence. 3-During an interview on 08/25/2025 at 01:30 PM, the LS confirmed that the TC failed to observe patient testing observation six month competency for TP#2 and TP#3.