

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 10D2097253	(X3) Date Survey Completed 12/04/2018
Name of Provider or Supplier Surgical Pathology Laboratories Pa Mlu12	Street Address, City, State 8455 66th St N, Pinellas Park, 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
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 record review and interview with the Office Manager, the laboratory failed to verify the accuracy of the reading and interpretation of the Hematoxylin and Eosin (H&E) stain twice annually in 2017 - 2018 for 3 out 8 testing personnel (#A, #G, and #H) by peer review. Findings include: 1. Review of the laboratory's records revealed documentation of one peer review for testing personnel #A for 2017 and twice annual peer reviews were absent for testing personnel #G and #H for 2017 -2018. 2. Interview on 12/04/18 at 11:30 AM, the Office Manager confirmed the lack of peer reviews for testing personnel #A, #G, and #H.</p>