

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  10D2131080	<b>(X3) Date Survey Completed</b>  05/17/2022
<b>Name of Provider or Supplier</b>  Urology Care Of Central Fl Pa	<b>Street Address, City, State</b>  2301 Se 3rd Avenue Bldg 100 Ste A, Ocala, 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>	At the time of the announced, onsite recertification survey, Urology Care of Central Florida was found to be in NOT compliance with the CLIA laboratory requirements of 42 CFR 493. .
<b>D5217</b>	<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 staff interview, the laboratory failed to send histopathology and cytology patient slides for peer review in 2021. Findings include: There was no documented histopathology and cytology peer review for 2021. During an interview on 5/17/22 at 9:45am, the Laboratory Director stated that peer review had not been performed in 2021.</p>