Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 10D2179302	(X3) Date Survey Completed 12/22/2025
Name of Provider or Supplier Pediatric Associates	**Street Address, City, State** 12871 Citrus Park Dr, Tampa, 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 Pediatrics Associates on 12/18/25 to 12/22/25. The laboratory was surveyed under 42 CFR Part 493 CLIA requirements. A Standard level deficiency was cited as follows:
D6005	LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1407(c) (c) The laboratory director must: (c)(1) Be onsite at least once every 6 months, with at least 4 months between the minimum two on-site visits. Laboratory directors may elect to be on-site more frequently and must continue to be accessible to the laboratory to provide telephone or electronic consultation as needed; and (c)(2) Provide documentation of these visits, including evidence of performing activities that are part of the laboratory director responsibilities. This STANDARD is not met as evidenced by: Based on record review and interview, the Laboratory Director failed to establish a policy to be onsite once every six months and failed to document any onsite visits from 1/1/2025 to 12/18/2025. Findings included: 1. The Quality Event Review dated 12/15/2025 was presented as proof of process for the Laboratory Director to perform documented onsite visits. The Quality Event Review dated 12/15/2025 failed to be an approved procedure for onsite once every six months and there failed to be any documentation of onsite visits from 1/1/2025 to 12/18/2025 performed by the Laboratory Director 2. On 12/18/2025 at 11:42 a.m., the Diagnostic Director verified via call there failed to be an established policy to be onsite once every six months and failed to document any onsite visits from 1/1/2025 to 12/18/2025.