Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 10D2273836	(X3) Date Survey Completed 11/06/2024
Name of Provider or Supplier Healthcare Colleagues Pa	**Street Address, City, State** 411 Maitland Ave Suite 1001, Altamonte Springs, 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	At the time of the announced, onsite recertification survey, Healthcare Colleagues Pa was found to be not in compliance with the CLIA laboratory requirements of 42 CFR 493.
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 staff interview, the laboratory failed to document the laboratory room temperature, humidity, and temperature of the cryostat for 2 out of 17 days reviewed in August 2024 ,and 2 out of 16 days in September 2024. Findings include: Review of the document titled "Laboratory Environment Log" showed no documentation of laboratory temperature, humidity, or cryostat temperature on 8/6/24, 8/7/24, 9/4/24, and 9/12/24. During the interview with the Practice Manager on 11/6 /24 at 9:00am, it was confirmed the documentation was missing for room temperature, humidity, and cryostat temperature.