

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  11D0256605	<b>(X3) Date Survey Completed</b>  01/24/2018
<b>Name of Provider or Supplier</b>  Northside Hospital Duluth	<b>Street Address, City, State</b>  3620 Howell Ferry Road, Duluth, GA	
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>	<p>A complaint survey was performed on March 13, 2017. Gwinnett Medical Center was not in compliance with the 42 CFR Part 493, Requirements for Laboratories. The Conditions at 42 CFR 493.801- Enrollment and testing of samples. Laboratory A is Gwinnett Medical Center (11D0257657) 1000 Medical Center Boulevard Lawrenceville, Georgia 30046. Laboratory B Gwinnett Medical Center-Duluth (11D0256605) 3620 Howell Ferry Road Duluth, Georgia 30096. Laboratory B sent CAP ID3-A 2016 Influenza A, Influenza B, and RSV Proficiency Testing (PT) samples to Laboratory A for analysis since Laboratory A used all of their PT samples. Laboratory A engaged in inter-laboratory communications with Laboratory B pertaining to the results of proficiency testing samples prior to the date by which Laboratory A was required to report proficiency testing results to the College of American Pathologist (CAP). Laboratory A reported the results of Laboratory B's PT samples to CAP in place of Laboratory A's own incorrect results.</p>