

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  11D0257012	<b>(X3) Date Survey Completed</b>  11/19/2020
<b>Name of Provider or Supplier</b>  Woodall, Wilson & Manley Md Llp	<b>Street Address, City, State</b>  101 Houston St, Barnesville, 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>	A Clinical Laboratory Improvement Amendments (CLIA) recertification survey was completed on November 19, 2020. The laboratory was not in compliance with applicable CLIA requirements found at 42 CFR 493.1 through 42 CFR 493.1780. The following deficiencies were cited:
<b>D2007</b>	<p><b>TESTING OF PROFICIENCY TESTING SAMPLES</b> CFR(s): 493.801(b)(1)</p> <p>The samples must be examined or tested with the laboratory's regular patient workload by personnel who routinely perform the testing in the laboratory, using the laboratory's routine methods</p> <p>This STANDARD is not met as evidenced by: Based on review of the proficiency testing (PT) records and staff interview, the lab failed to rotate PT samples among all testing personnel (TP). Findings include: 1. Review of the PT documents: 2019 testing event #2 through 2020 testing event #3 revealed the same TP (#1 CMS 209 form) performed all PT testing. 2. Interview with testing personnel #1 (CMS 209 form) on 11/19/20 at approximately 12:05 PM in the breakroom, confirmed the same TP performed the aforementioned PT. <b>**REPEAT DEFICIENCY**</b></p>
<b>D6053</b>	<p><b>TECHNICAL CONSULTANT RESPONSIBILITIES</b> CFR(s): 493.1413(b)(9)</p> <p>The technical consultant is responsible for evaluating and documenting the performance of individuals responsible for moderate complexity testing at least semiannually during the first year the individual tests patient specimens.</p> <p>This STANDARD is not met as evidenced by:</p>

Based on review of testing personnel(TP) documents and staff interview, the technical consultant failed to perform semiannual competency on all testing personnel. Findings include: 1. No documents were available to review for personnel semiannual competency on TP #2 in the month of April 2020. 2. Interview with testing personnel #1 (CMS 209 form) on 11/19/20 at approximately 11:55 AM in the breakroom, confirmed the lack of the aforementioned personnel semiannual competency.