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| Statement of Deficiencies | (X1) Provider/Supplier/CLIA Identification Number 11D0258592 | (X3) Date Survey Completed 04/28/2022 |
| Name of Provider or Supplier Internal Medicine Specialists Of Atlanta, Pc | Street Address, City, State 1800 Howell Mill Road, Suite 175, Atlanta, GA | |
| 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 |
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| D0000 | A Clinical Laboratory Improvement Amendments (CLIA) recertification survey was completed on April 28, 2022. 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: |
| D5805 | <p>TEST REPORT CFR(s): 493.1291(c)</p> <p>The test report must indicate the following: (c)(1) For positive patient identification, either the patient's name and identification number, or a unique patient identifier and identification number. (c)(2) The name and address of the laboratory location where the test was performed. (c)(3) The test report date. (c)(4) The test performed. (c)(5) Specimen source, when appropriate. (c)(6) The test result and, if applicable, the units of measurement or interpretation, or both. (c)(7) Any information regarding the condition and disposition of specimens that do not meet the laboratory's criteria for acceptability.</p> <p>This STANDARD is not met as evidenced by: Based on lab report review and staff interviews, the laboratory failed to include all the required information on the in-house laboratory test reports. Findings include: 1. Review of in-house patient report (MR#91230/ requisition 000279048) revealed the in-house report did not indicate the lab name or address where the tests were performed. 2. Interview with the office manager and lab director on 4/28/22 at approximately 12:15 PM in the office of the office manager, confirmed the missing information on the in-house patient lab reports. ** Repeat Deficiency**</p> |