

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 11D0263537	(X3) Date Survey Completed 08/20/2019
Name of Provider or Supplier Internal Medicine Associates Of Middle Georgia Pc	Street Address, City, State 97 Martin Luther King Jr Dr, Forsyth, 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
D0000	A Clinical Laboratory Improvement Amendments (CLIA) Recertification survey was completed on August 20, 2019. 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:
D2007	<p>TESTING OF PROFICIENCY TESTING SAMPLES 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 test (PT) documents and staff interview, the lab failed to rotate PT among all testing personnel. Findings include: 1. Review of the College of American Pathologist (CAP) PT documents revealed staff #2 performed 4 of 5 testing events in 2018 - 2019 to date. 2. Interview with staff #2 (CMS 209 form) on 08/20/19 in the breakroom at approximately 1:30 PM, confirmed the aforementioned PT was performed by staff #2.</p>
D5429	<p>MAINTENANCE AND FUNCTION CHECKS CFR(s): 493.1254(a)(1)</p> <p>For unmodified manufacturer's equipment, instruments, or test systems, the laboratory must perform and document maintenance as defined by the manufacturer and with at least the frequency specified by the manufacturer.</p> <p>This STANDARD is not met as evidenced by: Based on Cell-Dyn Emerald maintenance document review and staff interview, the</p>

lab failed to perform and document maintenance per the procedure manual. Findings include: 1. Review of the 2018 Cell-Dyn Emerald maintenance logs revealed the monthly maintenance was performed in June 2018, but the Semi-Annual due was not performed/ documented. Review of the December 2018 maintenance logs revealed the Semi-Annual maintenance was performed but the monthly maintenance was not performed/ documented. 2. Interview with staff #2 (CMS 209 form) on 08/20/19 in the lab at approximately 1:30 PM, confirmed the aforementioned maintenance was not performed/ documented.