

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 11D0948963	(X3) Date Survey Completed 02/10/2021
Name of Provider or Supplier Collier B Gladin Jr Md	Street Address, City, State 140 North Crest Boulevard, Macon, 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 February 10, 2021. 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:
D2009	<p>TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(1)</p> <p>The individual testing or examining the samples and the laboratory director must attest to the routine integration of the samples into the patient workload using the laboratory's routine methods.</p> <p>This STANDARD is not met as evidenced by: Based on review of the American Proficiency Institute (API) Proficiency Testing (PT) documents, the laboratory failed to obtain the testing personnel (TP), and the Laboratory Director's (LD) signature on the Attestation Statement for all three events for the 2020 Hematology, and second event for 2019 Hematology. Findings: 1. Review of the PT documents from API for all three events for 2020, for Hematology, and the second event for 2019, the attestation statements were not signed by the LD or the TP to attest that the PT samples were analyzed in the same manner as patient samples. 2. Interview with the LD, and the TP, in the laboratory office on February 10, 2021, at approximately 1 pm, confirmed that the Attestation Statements for the Hematology PT, for all three events for 2020 and the second event for 2019, were not signed by the LD or the TP.</p>