

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 11D0987757	(X3) Date Survey Completed 07/20/2023
Name of Provider or Supplier Kids First Pediatrics Of Georgia Pc	Street Address, City, State 143 Canal Street, Suite 500, Pooler, 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 recertification survey was performed on July 20, 2023. The facility was found to be NOT in compliance with all applicable CLIA requirements for specialties /subspecialties for 42 CFR.
D3031	<p>RETENTION REQUIREMENTS CFR(s): 493.1105(a)(3)</p> <p>Analytic systems records. Retain quality control and patient test records (including instrument printouts, if applicable) and records documenting all analytic systems activities specified in 493.1252 through 493.1289 for at least 2 years.</p> <p>This STANDARD is not met as evidenced by: Based on review of the monthly Temperature logs, and staff interview, for the years 2021, 2022, and 2023, the laboratory failed to retain copies of temperature logs for 7 out of 12 months for 2022. Documents should be kept for at least 2 years. Findings: 1. Based on the review of the Monthly Temperature logs for 2022, the laboratory could not provide copies of the temperature charts for the following months: April, May, June, July, August, September, and November. 2. Interview with the Laboratory Director on July 20, 2023, at approximately 3 pm in the upstairs hallway, confirmed the aforementioned statement.</p>
D6010	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1407(e)(2)</p> <p>The laboratory director is responsible for the overall operation and administration of the laboratory, including the employment of personnel who are competent to perform test procedures, and record and report test results promptly, accurate, and proficiently and for assuring compliance with the applicable regulations. (e) The laboratory director must-- (e)(2) Ensure that the physical plant and environmental conditions of the laboratory are appropriate for the testing performed.</p>

This STANDARD is not met as evidenced by:

Based on review of the Temperature documents and staff interview, the Laboratory Director (LD) failed to make sure the temperature charts for 7 out of 12 months were retained for the year 2022. Per CMS regulations, documents are kept for at least 2 years. Findings: 1. Based on the review of the Monthly Temperature logs for 2022, the laboratory could not provide copies of the temperature charts for the following months: April, May, June, July, August, September, and November. 2. Interview with the Laboratory Director on July 20, 2023, at approximately 3 pm in the upstairs hallway, confirmed the aforementioned statement