Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	11D0991987	11/19/2019
Name of Provider or Supplier	**Street Address, City, State**	
Sgpa - Medical Oncology	125 Peachtree Street, Jesup, 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 November 19, 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:
D6054	TECHNICAL CONSULTANT RESPONSIBILITIES CFR(s): 493.1413(b)(9) The technical consultant is responsible for evaluating and documenting the performance of individuals responsible for moderate complexity testing at least annually, after the first year. This STANDARD is not met as evidenced by: Based on review of testing personnel (TP) documents and staff interview , the technical consultant (lab director) failed to perform annual competency on all testing personnel. Findings include: 1. Review of testing personnel (TP) competency documents reveals the technical consultant (lab director) failed to perform annual competency on 2 of 2 testing personnel during the year of 2018. 2. Interview with staff #1 (CMS 209 form) on 11/19/19 at approximately 2:30 PM in the front side office, confirmed the annual competencies were not performed.