

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 11D0992000	(X3) Date Survey Completed 02/10/2022
Name of Provider or Supplier Dublin Hematology & Oncology Care Pc	Street Address, City, State 207 Fairview Park Drive - Dublin, Dublin, 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, 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:
D5203	<p>SPECIMEN IDENTIFICATION AND INTEGRITY CFR(s): 493.1232</p> <p>The laboratory must establish and follow written policies and procedures that ensure positive identification and optimum integrity of a patient's specimen from the time of collection or receipt of the specimen through completion of testing and reporting of results.</p> <p>This STANDARD is not met as evidenced by: Based on review of the procedure for proper labeling of samples, laboratory tour, and staff interview, the laboratory failed to properly label specimens for testing on the Abbott Cell-Dyn Emerald (Emerald), Hematology analyzer. Findings: 1. Observed during the lab tour, 10 sample tubes were placed in a rack after running the samples through the Emerald. The tubes were only labeled with the patient's first and last name. 2. Review of the procedure for labeling specimens for hematology, from the Operator's Manual for the Emerald, states that all samples should be labeled with patient's name, date of birth, MR number, and doctors name. 3. Interview with staff #2, and office manager, on 02/10/2022, at approximately 12 pm in the laboratory, confirmed the aforementioned statements.</p>