

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  11D2004759	<b>(X3) Date Survey Completed</b>  04/05/2018
<b>Name of Provider or Supplier</b>  D Conrad Harper Md, Llc	<b>Street Address, City, State</b>  101 Nw Bowens Mill Rd, Suite D, Douglas, GA	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D0000</b>	A Clinical Laboratory Improvement Amendments (CLIA) recertification survey was completed on April 5, 2018. The laboratory was not in compliance with all applicable CLIA requirements found at 42 CFR 493.1 through 42 CFR 493.1780. The following Condition level was cited:
<b>D2016</b>	<p><b>SUCCESSFUL PARTICIPATION</b> CFR(s): 493.803(a)(b)(c)</p> <p>(a) Each laboratory performing nonwaived testing must successfully participate in a proficiency testing program approved by CMS, if applicable, as described in subpart I of this part for each specialty, subspecialty, and analyte or test in which the laboratory is certified under CLIA. (b) Except as specified in paragraph (c) of this section, if a laboratory fails to participate successfully in proficiency testing for a given specialty, subspecialty, analyte or test, as defined in this section, or fails to take remedial action when an individual fails gynecologic cytology, CMS imposes sanctions, as specified in subpart R of this part. (c) If a laboratory fails to perform successfully in a CMS-approved proficiency testing program, for the initial unsuccessful performance, CMS may direct the laboratory to undertake training of its personnel or to obtain technical assistance, or both, rather than imposing alternative or principle sanctions except when one or more of the following conditions exists: (1) There is immediate jeopardy to patient health and safety. (2) The laboratory fails to provide CMS or a CMS agent with satisfactory evidence that it has taken steps to correct the problem identified by the unsuccessful proficiency testing performance. (3) The laboratory has a poor compliance history.</p> <p>This CONDITION is not met as evidenced by: Based on review of the facility's Proficiency Provider, Medical Laboratory Evaluation (MLE ) proficiency documents, the laboratory failed to maintain satisfactory</p>

performance in two consecutive events ( 3rd event of 2017 and 1st event of 2018), resulting in the first unsuccessful occurrence for the analyte Albumin. Findings include: Refer to D2097

**D2097**

ROUTINE CHEMISTRY  
CFR(s): 493.841(g)

Failure to achieve an overall testing event score of satisfactory performance for two consecutive testing events or two out of three consecutive testing events is unsuccessful performance.

This STANDARD is not met as evidenced by:

Based on review of the Proficiency Provider, Medical Laboratory Evaluation (MLE), documents for the year 2017 and 2018, and staff interview, the laboratory failed to achieve an overall testing event score of satisfactory performance for two consecutive testing events for the Speciality Chemistry, analyte Albumin. Findings: 1. Based on review of the MLE proficiency documents for the 3rd event in 2017, for the analyte Albumin, the laboratory received a score of 0 percent, for failure to participate. For the 1st event of 2018, for the analyte Albumin the laboratory received a score of 40 percent, for an unsuccessful performance for two consecutive testing events. 2. Interview with staff #1 testing personnel (CMS 209 form), on 04/05/2017 at 11:30am in the break room, confirmed that the laboratory failed to achieve a successful score on the MLE proficiency event #3, 2017 and event #1, 2018 on the analyte Albumin.