

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  11D2044499	<b>(X3) Date Survey Completed</b>  09/30/2020
<b>Name of Provider or Supplier</b>  Ocumulgee Medical Pathology Associates	<b>Street Address, City, State</b>  1100 Johnson Ferry Road, Suite Ii - 464, Tuxedo, 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 September 30, 2020. 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:
<b>D3011</b>	<p>FACILITIES CFR(s): 493.1101(d)</p> <p>Safety procedures must be established, accessible, and observed to ensure protection from physical, chemical, biochemical, and electrical hazards, and biohazardous materials.</p> <p>This STANDARD is not met as evidenced by: Based on observation and staff interview, the laboratory failed to ensure protection from physical and electrical hazards as required. Findings include: 1. Observation during the laboratory tour on 9/30/2020 at approximately 12:10 p.m. revealed the fire extinguisher in the hallway near the laboratory and the fire extinguisher in the break area had not been professionally inspected since 7/2018. 2. An interview with the lead histotech in the hallway near the laboratory on 9/30/2020 at approximately 12:15 p.m. confirmed both fire extinguishers were last professionally inspected in 7/2018.</p>