

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 11D2047639	(X3) Date Survey Completed 08/14/2018
Name of Provider or Supplier Erlanger Ringgold South	Street Address, City, State 60 Erlanger South Drive, Ringgold, 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 August 14, 2018. 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:
D5781	<p>CORRECTIVE ACTIONS CFR(s): 493.1282(b)(1)</p> <p>(b) The laboratory must document all corrective actions taken, including actions taken when any of the following occur: (b)(1) Test systems do not meet the laboratory's verified or established performance specifications, as determined in 493.1253(b), which include but are not limited to-- (b)(1)(i) Equipment or methodologies that perform outside of established operating parameters or performance specifications; (b)(1)(ii) Patient test values that are outside of the laboratory's reportable range of test results for the test system; and (b)(1)(iii) When the laboratory determines that the reference intervals (normal values) for a test procedure are inappropriate for the laboratory's patient population.</p> <p>This STANDARD is not met as evidenced by: Based on review of quality control (QC) records and staff interview, the lab failed to document corrective actions when QC exceeded acceptable limits. Findings include: 1. Review of QC records: November 2017, January 2018, and May 2018 revealed one (1) or more analytes were out of range without corrective actions documented. 2. Interview with the office manager on 08/14/18 at approximately 11:00 AM in the corner office, confirmed the corrective actions were not documented.</p>