

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 11D2152298	(X3) Date Survey Completed 05/23/2023
Name of Provider or Supplier Pediatric Partners Of Augusta, Llc	Street Address, City, State 5135 Wrightsboro Road, Suite B, Grovetown, 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 May 23, 2023. 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:
D2007	<p>TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(1)</p> <p>The samples must be examined or tested with the laboratory's regular patient workload by personnel who routinely perform the testing in the laboratory, using the laboratory's routine methods</p> <p>This STANDARD is not met as evidenced by: Based on Proficiency Testing (PT) document review and staff interview, the laboratory failed to ensure that the Testing Personnel (TP) rotated for performing PT for 7 out of 7 Microbiology Events for 2021-2023. The Findings include: 1. American Proficiency Testing (API) PT document review revealed that Testing Personnel was not rotated for performing Proficiency Testing (PT) for Microbiology 1st, 2nd, and 3rd Events for 2021, Microbiology 1st, 2nd, and 3rd Events for 2022, and Microbiology 1st Event for 2023. Testing Personnel #1(CMS-209) performed all 7 events. 2. During an interview with the owner of the practice on May 23, 2023 at approximately 11:20 AM in the front office for the doctor's, confirmed that Testing Personnel was not rotated for Proficiency Testing for 7 out of 7 events ranging from 2021-2023 for Microbiology.</p>
D5311	<p>SPECIMEN SUBMISSION, HANDLING, AND REFERRAL CFR(s): 493.1242(a)</p> <p>The laboratory must establish and follow written policies and procedures for each of the following, if applicable: (1) Patient preparation. (2) Specimen collection. (3)</p>

Specimen labeling, including patient name or unique patient identifier and, when appropriate, specimen source. (4) Specimen storage and preservation. (5) Conditions for specimen transportation. (6) Specimen processing. (7) Specimen acceptability and rejection. (8) Specimen referral.

This STANDARD is not met as evidenced by:

Based on review of the general laboratory standard operating procedure manual (SOP) and staff interview, the laboratory failed to establish written instructions for sending specimens to an outside reference laboratory for testing. The findings include: 1. A review of the SOP confirmed that a written policy and procedure (to include collection, preservation, storage, transport, testing schedule times, and how to obtain additional assistance) was not available for staff to follow when sending specimens to a reference laboratories: Quest and LabCorp. 2. During an interview, with the owner of the practice, on May 23, 2023, at 11:30 AM, in the front office of the doctor's, confirmed that the laboratory did not have a written policy and procedure for staff to follow when sending specimens to reference laboratories or establish written instructions for sending specimens to an outside reference laboratory for testing.