

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  11D2152298	<b>(X3) Date Survey Completed</b>  06/20/2025
<b>Name of Provider or Supplier</b>  Pediatric Partners Of Augusta, Llc	<b>Street Address, City, State</b>  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.		

<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 June 20, 2025. 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>D5417</b>	<p>TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(d)</p> <p>(d) Reagents, solutions, culture media, control materials, calibration materials, and other supplies must not be used when they have exceeded their expiration date, have deteriorated, or are of substandard quality.</p> <p>This STANDARD is not met as evidenced by: A tour of the laboratory confirmed that expired reagents were being used for patient testing and resulting. THE FINDINGS INCLUDE: 1.A tour of the laboratory confirmed that several reagents and controls, in use for patient testing, were expired. a. HEMOCUE GLUCOSE 201 MICROCUVETTES: Expired 06/14/2025 b. GLUTROL AQ CONTROLS: Expired 06/30/2024 c. CHOLESTECH LDX MULTIANALYTE CONTROL: Expired 06/11/2021 d. BD SODIUM CITRATE TUBES: Expired 05/31/2025 e. BD URINE CULTURE VACUTAINER: Expired 02/28/2025 2. An exit interview with the Laboratory Director, on June 20, 2025, at 12:30pm, in the Conference Office confirmed that expired reagents, were in use for patent testing, at the time of onsite inspection, performed on 06/20/2025.</p>
<b>D5507</b>	<p>BACTERIOLOGY CFR(s): 493.1261(b)(c)</p> <p>(b) For antimicrobial susceptibility tests, the laboratory must check each batch of media and each lot number and shipment of antimicrobial agent(s) before, or concurrent with, initial use, using approved control organisms. (b)(1) Each day tests</p>

are performed, the laboratory must use the appropriate control organism(s) to check the procedure. (b)(2) The laboratory's zone sizes or minimum inhibitory concentration for control organisms must be within established limits before reporting patient results. (c) The laboratory must document all control procedures performed, as specified in this section.

This STANDARD is not met as evidenced by:

A review of 2023 - 2025 Quality Control Records, confirmed that the laboratory did not follow the Throat Culture quality control procedures for each day of use as required. THE FINDINGS INCLUDE: 1. A review of the 2023 - 2025 Quality Control Records revealed that daily quality control records for the Throat Culture Procedure were not monitored. 2. An interview with the Laboratory Director confirmed that testing personnel did not include quality controls with each patient testing batch. 3. An exit interview, with the Laboratory Director, on June 20, 2025, at 12:30pm, in the Conference Office confirmed that the laboratory did not include quality controls for the Throat Culture Procedure each day of use as required.