

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 13D2273429	(X3) Date Survey Completed 10/25/2023
Name of Provider or Supplier Sterling Urgent Care	Street Address, City, State 260 East Moody Rd, Rexburg, ID	
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
D5809	<p>TEST REPORT CFR(s): 493.1291(e)</p> <p>The laboratory must, upon request, make available to clients a list of test methods employed by the laboratory and, as applicable, the performance specifications established or verified as specified in 493.1253. In addition, information that may affect the interpretation of test results, for example test interferences, must be provided upon request. Pertinent updates on testing information must be provided to clients whenever changes occur that affect the test results or interpretation of test results.</p> <p>This STANDARD is not met as evidenced by: Based on a review of patient test reports and an interview with the laboratory manager on 10/25/2023, the laboratory failed to specify the test method for Prostate Specific Antigen (PSA) testing on patient test reports. The findings include: 1. A review of patient test reports for PSA testing identified that the laboratory failed to list the analyzer and methodology used for performing the test to ensure proper test interpretation. 2. An interview with the laboratory manager on 10/25/2023 at 3:13 pm confirmed that the laboratory failed to list the analyzer and testing methodology on PSA test reports. 3. The laboratory reports performing 10 PSA tests annually.</p>