Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	13D2273429	05/06/2025
Name of Provider or Supplier	**Street Address, City, State**	
Sterling Urgent Care	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
D0000	During an offsite paper revisit the laboratory was found to be in compliance with CLIA regulations (42 CFR Part 493 effective April 24, 2003.), all previous deficiencies found were corrected.
D5417	TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(d) (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. This STANDARD is not met as evidenced by: Based on a direct observation and an interview with the laboratory compliance manager on 5/6/2025, the laboratory failed to discontinue the use of expired vacutainer blood specimen collection tubes. The findings include: 1. A direct observation of the laboratory's blood specimen collection tubes on 5/6/2025 identified that the laboratory failed to discontinue the use of one (2) BD K2 EDTA tube lot 3136182, expiration 9/30/2024; one (1) Greiner Bio One K2 EDTA tube lot B230833N, expiration 11/30/2024 and two (2) Greiner Bio One K2 EDTA tubes lot B2311378, expiration 3/2/2025, prior to the expiration dates. 2. An interview with the laboratory compliance manager on 5/6/2025 at 3:29 pm confirmed the above finding. 3. The laboratory reports performing 3,456 waived and moderate complexity tests annually
D5429	MAINTENANCE AND FUNCTION CHECKS CFR(s): 493.1254(a)(1) (a)(1) Maintenance as defined by the manufacturer and with at least the frequency specified by the manufacturer.

	This STANDARD is not met as evidenced by: Based on a review of the laboratory maintenance logs, instrument manuals and an interview with the laboratory compliance manager on 5/6/2025, the laboratory failed to perform maintenance as required by the Sysmex pocH-100i manufacturer. The findings include: 1. A review of maintenance logs for the Sysmex pocH-100i instrument identified that the laboratory failed to have documentation of the performance of daily and biweekly maintenance for December 2023. 2. An interview with the laboratory compliance manager on 5/6/2025 at 3:30 pm confirmed the above finding. 3. The laboratory reports performing Sysmex pocH-100i 456 tests annually.