

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 14D0646583	(X3) Date Survey Completed 11/25/2025
Name of Provider or Supplier Chicago Department Of Public Health	Street Address, City, State 4909 W Division - Suite 411, Chicago, IL	
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
D5805	<p>TEST REPORT CFR(s): 493.1291(c)</p> <p>(c) The test report must indicate the following: (c)(1) For positive patient identification, either the patient's name and identification number, or a unique patient identifier and identification number. (c)(2) The name and address of the laboratory location where the test was performed. (c)(3) The test report date. (c)(4) The test performed. (c)(5) Specimen source, when appropriate. (c)(6) The test result and, if applicable, the units of measurement or interpretation, or both. (c)(7) Any information regarding the condition and disposition of specimens that do not meet the laboratory's criteria for acceptability.</p> <p>This STANDARD is not met as evidenced by: Based on review of patient test reports, lack of documentation, and interview with the laboratory director (LD); the laboratory failed to include the address of the location where testing in the specialties of microbiology and diagnostic immunology was performed for 17 of 17 patient test reports reviewed. Findings include: 1. Review of 17 of 17 patient test reports reviewed found the laboratory failed to indicate the address of the performing laboratory on the final test reports. MRN*: Date of testing: Location: 2404557 12/12/2023 Lakeview 2285313 12/12/2023 Lakeview 2404577 12/13/2023 Lakeview 2405620 04/22/2024 Roseland 2405248 04/29/2024 Roseland 40071281 05/09/2024 Roseland 2406508 07/26/2024 Austin 2406615 08/06/2024 Austin 40057181 08/07/2024 Austin 2297404 01/13/2025 Lakeview 40079419 01/31/2025 Lakeview 2409078 05/13/2025 Austin 2409180 05/28/2025 Austin 2409205 05/28/2025 Austin 2410300 09/11/2025 Roseland 2410297 09/11/2025 Roseland 40038713 09/11/2025 Roseland *MRN = Medical Record Number 2. Interview with the LD on 11/25/2025, at 1:07 pm, confirmed the laboratory failed to include the address of the location where testing in the specialties of microbiology and diagnostic immunology was performed for 17 of 17 patient test reports reviewed.</p>