

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 14D2168001	(X3) Date Survey Completed 05/08/2025
Name of Provider or Supplier Stat Laboratory Inc	Street Address, City, State 10714 S Roberts Rd, Ste A, Palos Hills, 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
D2016	<p>SUCCESSFUL PARTICIPATION CFR(s): 493.803(a)(b)(c)</p> <p>(a) Each laboratory performing nonwaived testing must successfully participate in a proficiency testing program approved by CMS, if applicable, as described in subpart I of this part for each specialty, subspecialty, and analyte or test in which the laboratory is certified under CLIA. (b) Except as specified in paragraph (c) of this section, if a laboratory fails to participate successfully in proficiency testing for a given specialty, subspecialty, analyte or test, as defined in this section, or fails to take remedial action when an individual fails gynecologic cytology, CMS imposes sanctions, as specified in subpart R of this part. (c) If a laboratory fails to perform successfully in a CMS-approved proficiency testing program, for the initial unsuccessful performance, CMS may direct the laboratory to undertake training of its personnel or to obtain technical assistance, or both, rather than imposing alternative or principle sanctions except when one or more of the following conditions exists: (1) There is immediate jeopardy to patient health and safety. (2) The laboratory fails to provide CMS or a CMS agent with satisfactory evidence that it has taken steps to correct the problem identified by the unsuccessful proficiency testing performance. (3) The laboratory has a poor compliance history.</p> <p>This CONDITION is not met as evidenced by: Based on an off-site desk review of the Certification and Survey Provider Enhanced Reporting (CASPER) Report 0155D Individual Laboratory Profile and Medical Laboratory Evaluation (MLE) Proficiency Testing (PT) records confirmed the initial unsuccessful PT performance for the routine chemistry analyte iron, total (See D2096) for two of three PT events in 2024 through 2025 (event two of 2024 and event one of 2025).</p>
D2096	<p>ROUTINE CHEMISTRY CFR(s): 493.841(f)</p>

(f) Failure to achieve satisfactory performance for the same analyte or test in two consecutive testing events or two out of three consecutive testing events is unsuccessful performance.

This STANDARD is not met as evidenced by:

Based on an off-site desk review of the Certification and Survey Provider Enhanced Reporting (CASPER) Report 0155D Individual Laboratory Profile and Medical Laboratory Evaluation (MLE) Proficiency Testing (PT) records the laboratory failed to achieve satisfactory performance for the routine chemistry analyte iron, total for two of three PT events in 2024 through 2025 (event two of 2024 and event one of 2025) resulting in the initial unsuccessful PT performance for iron, total. Findings include: 1. Review of the CASPER Report 0155D, generated on 05-01-2025, the laboratory received the following unsatisfactory scores for the routine chemistry analyte iron, total. Iron, total EVENT 2, 2024 - 60% Unsatisfactory EVENT 1, 2025 - 0% Unsatisfactory 2. Review of MLE PT evaluation reports for the chemistry events M2 2024 and M1 2025 confirmed the initial unsuccessful performance for the routine chemistry analyte iron, total.

D6000

MODERATE COMPLEXITY LABORATORY DIRECTOR
CFR(s): 493.1403

The laboratory must have a director who meets the qualification requirements of 493.1405 of this subpart and provides overall management and direction in accordance with 493.1407 of this subpart.

This CONDITION is not met as evidenced by:

Based on an off-site desk review of the Certification and Survey Provider Enhanced Reporting (CASPER) Report 0155D Individual Laboratory Profile and Medical Laboratory Evaluation (MLE) Proficiency Testing (PT) records the laboratory director failed to ensure successful participation in a Health and Human Services (HHS) approved PT program for the routine chemistry analyte iron, total resulting in the laboratory's initial unsuccessful PT performance (see D6016).

D6016

LABORATORY DIRECTOR RESPONSIBILITIES
CFR(s): 493.1407(e)(4)(i)

(e)(4)(i) The proficiency testing samples are tested as required under Subpart H of this part;

This STANDARD is not met as evidenced by:

Based on an off-site desk review of the Certification and Survey Provider Enhanced Reporting (CASPER) Report 0155D Individual Laboratory Profile and Medical Laboratory Evaluation (MLE) Proficiency Testing (PT) records the laboratory director failed to ensure successful participation in a Health and Human Services (HHS) approved PT program for the routine chemistry analyte iron, total (see D2096) resulting in the laboratory's initial unsuccessful PT performance.