

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 17D0449875	(X3) Date Survey Completed 10/10/2019
Name of Provider or Supplier Associated Urologists, Pa	Street Address, City, State 1133 College Ave, G100, Manhattan, KS	
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
D5807	<p>TEST REPORT CFR(s): 493.1291(d)</p> <p>Pertinent "reference intervals" or "normal" values, as determined by the laboratory performing the tests, must be available to the authorized person who ordered the tests and, if applicable, the individual responsible for using the test results.</p> <p>This STANDARD is not met as evidenced by: Based on review of approved reference ranges in the laboratory procedure manual and interview with the Technical Consultant #1, the laboratory failed to ensure the test report included pertinent normal ranges as determined by the laboratory. Two of the nine parameters for microscopic urinalysis listed on the laboratory information system (LIS) report differed from those in the approved procedure manual. Findings: 1. Review of the patient reports from the LIS system revealed two of the nine parameters for microscopic urinalysis exams on the LIS report did not match the procedure manual. LIS patient report ranges Procedure ranges Bacteria none/HPF 0-5/HPF Crystals none/HPF 0-3/HPF 2. Interview with the Technical Consultant #1 on October 10, 2019 @ 1:30 PM confirmed the laboratory failed to ensure correct reference ranges approved in the procedure manual were included on the LIS patient report.</p>