

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 19D0984456	(X3) Date Survey Completed 04/23/2026
Name of Provider or Supplier La Sexually Transmitted Disease Research Center	Street Address, City, State 533 Bolivar Street, Room 711, New Orleans, LA	
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	A Recertification survey was performed at LA Sexually Transmitted Disease Research Center, CLIA ID 19D0984456, on April 23, 2026. The laboratory was found in compliance with 42 CFR 493 Requirements for Laboratories; however, standard level deficiencies were cited.
D5891	<p>POSTANALYTIC SYSTEMS QUALITY ASSESSMENT CFR(s): 493.1299(a)</p> <p>(a) The laboratory must establish and follow written policies and procedures for an ongoing mechanism to monitor, assess and, when indicated, correct problems identified in the postanalytic systems specified in 493.1291.</p> <p>This STANDARD is not met as evidenced by: Based on review of the laboratory's patient reports and interview with personnel, the laboratory failed to establish a quality assessment program to identify and correct issues within the post analytic system. Findings: 1. Review of the laboratory's patient test reports revealed the time of collection and/or incubation time of the media plate were not documented for the following three (3) of fourteen (14) randomly selected patients reviewed: a) August 11, 2025: Patient 83172: the time of incubation b) September 2025: Patient 58270: the time of incubation c) January 15, 2026: Patient ID 11037: the collection time and time of incubation were not documented 2. In interview on April 23, 2026 at 10:45 am, Technical Supervisor 1 confirmed the identified patient reports did not have the time of collection and/or time of incubation documented.</p>
D6093	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(5)</p> <p>(e)(5) Ensure that the quality control and quality assessment programs are established and maintained to assure the quality of laboratory services provided and to identify</p>

failures in quality as they occur;

This STANDARD is not met as evidenced by:

Based on record review and interview with personnel, the Laboratory Director failed to ensure the quality assessment programs were established to assure the quality of laboratory testing. Refer to D5891.