

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 21D0663183	(X3) Date Survey Completed 04/23/2024
Name of Provider or Supplier Aids Monitoring Lab	Street Address, City, State Bldg 469 Rooms 12,256-258, Frederick, MD	
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 the review of approved reference ranges in the laboratory procedure manual, two of two patient reports, and an interview with the technical supervisor (TC) #2, the laboratory failed to ensure the test report included pertinent normal ranges as determined by the laboratory. Three of the nine complete blood cell count (CBC) parameters listed on the laboratory information system (LIS) patient report differed from those in the procedure manual. Findings: 1. Review of two of two patient reports from the LIS system revealed three of the nine CBC parameters listed on the laboratory information system (LIS) patient report differed from those in the procedure manual. LIS Patient Report Total Lymphs/uL 1.012.03-2871.49 Bands % 0.00-0.00 Atyp % 0.00-2.00 Procedure Manual Total Lymphs/uL 0.94-3.04 Bands % no value Atyp % no value 2. Interview with the TC #2 on April 23, 2024, at 1:15 PM confirmed the laboratory failed to ensure correct reference ranges approved in the procedure manual were included on the LIS patient report. 3. The laboratory reports approximately 3,892 CBC tests annually.</p>