

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 21D0703863	(X3) Date Survey Completed 12/03/2025
Name of Provider or Supplier Children's Doctor,The	Street Address, City, State 21 Wyand Dr, Keedysville, 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
D2009	<p>TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(1)</p> <p>(b)(1) The individual testing or examining the samples and the laboratory director must attest to the routine integration of the samples into the patient workload using the laboratory's routine methods.</p> <p>This STANDARD is not met as evidenced by: Based on review of proficiency testing (PT) records and interview with the technical consultant (TC), the laboratory failed to ensure that the testing personnel (TP) and laboratory director (LD) attested to the routine integration of the samples into the patient workload using the laboratory's routine methods in two of six PT events reviewed. Findings: 1. Records from the third PT event in 2024 through the third PT event in 2025 were reviewed for a total of six events. 2. The laboratory recorded the PT sample results on the patient testing log which captured the initials of the TP who performed the testing for each PT sample. 3. Attestation forms from the 2024 first PT event were not signed by the LD or TP. 4. Attestation forms from the 2025 first PT event were not signed by the TP who performed testing and whose initials were documented on the patient testing log 5. During the survey on 12/03/2025 at 11:00 AM, the TC confirmed that attestations were missing signatures from the LD and/or TP in two of six PT events reviewed.</p>