

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  21D0937525	<b>(X3) Date Survey Completed</b>  09/25/2023
<b>Name of Provider or Supplier</b>  Planned Parenthood	<b>Street Address, City, State</b>  19650 Clubhouse Rd #101, Gaithersburg, MD	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D5787</b>	<p>TEST RECORDS CFR(s): 493.1283(a)</p> <p>The laboratory must maintain an information or record system that includes the following: (a)(1) The positive identification of the specimen. (a)(2) The date and time of specimen receipt into the laboratory. (a)(3) The condition and disposition of specimens that do not meet the laboratory's criteria for specimen acceptability. (a)(4) The records and dates of all specimen testing, including the identity of the personnel who performed the test(s).</p> <p>This STANDARD is not met as evidenced by: Based on review of patient Rh test records and interview with the technical consultant, the laboratory did not have policies to ensure Rh test results are documented on test records in a reliable manner. Findings: 1. On March 20, 2023, November 1, 2022 and October 19, 2022 a check mark was used to document that the patient control result was negative. 2. On April 10, 2023 the "c", that indicates where the control test result is entered was circled and a control result was not entered. 3. The laboratory's written procedure for documenting Rh test results did not state how to record Rh test results on the patient test result log. 4. This was confirmed with the technical consultant on the afternoon of the day of survey.</p>