

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 21D2137901	(X3) Date Survey Completed 02/20/2026
Name of Provider or Supplier Potomac Oncology And Hematology	Street Address, City, State 6000 Executive Blvd Suite 501, Rockville, 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 record review and interview, the testing staff performing the proficiency testing for the 2nd and 3rd events of 2024 did not attest to the routine integration of the samples into the laboratory's routine methods. Findings: 1. The 2nd and 3rd proficiency testing events for 2024 did not have attestation statements signed by the testing staff who performed the proficiency testing. 2. This was confirmed during interview with the technical consultant on 2/20/26 at 12:00 pm.</p>
D2130	<p>HEMATOLOGY CFR(s): 493.851(f)</p> <p>(f) Failure to achieve satisfactory performance for the same analyte in two consecutive events or two out of three consecutive testing events is unsuccessful performance.</p> <p>This STANDARD is not met as evidenced by: The laboratory did not achieve satisfactory performance for the hematocrit analyte. Findings: 1. The laboratory scored 40% for event 3 of 2024, 40% for event 1 of 2025 and 60 % for the 2nd event of 2025, based on review of the proficiency test providers evaluation and the scores reported by CMS. 2. This was confirmed with the technical consultant on 2/20/26 at 12:00 pm.</p>