

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 23D0036143	(X3) Date Survey Completed 03/21/2018
Name of Provider or Supplier University Health Service	Street Address, City, State 207 Fletcher Street, Ann Arbor, MI	
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
D3031	<p>RETENTION REQUIREMENTS CFR(s): 493.1105(a)(3)</p> <p>Analytic systems records. Retain quality control and patient test records (including instrument printouts, if applicable) and records documenting all analytic systems activities specified in 493.1252 through 493.1289 for at least 2 years.</p> <p>This STANDARD is not met as evidenced by: . Based on record review and interview, the laboratory failed to retain the endocrinology quality control documents for one of 25 patient charts reviewed for two years. Findings include: 1. On March 21, 2018 at 10:49 a.m., record review of the quality control for the endocrinology estradiol, lutenizing hormone, and prolaction testing revealed the laboratory did not have any documentation to show the quality control was run on the day of testing for one (#5) of 25 patient charts audited in April 2016 to present date. 2. On March 21, 2018 at 10:49 a.m. when queried, testing personnel # 1 as listed on the CMS-209 was not able to provide the surveyor the requested quality control documents. 3. During the interview on March 21, 2018 at 10:49 a.m., testing personnel #1 confirmed the quality control data was not available to the surveyor for that day of endocrinology testing.</p>