

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 23D0682375	(X3) Date Survey Completed 09/13/2021
Name of Provider or Supplier Cancer Care Associates, P C	Street Address, City, State 3577 W Thirteen Mile Road, Suite 404, Royal Oak, 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
D5429	<p>MAINTENANCE AND FUNCTION CHECKS CFR(s): 493.1254(a)(1)</p> <p>For unmodified manufacturer's equipment, instruments, or test systems, the laboratory must perform and document maintenance as defined by the manufacturer and with at least the frequency specified by the manufacturer.</p> <p>This STANDARD is not met as evidenced by: . Based on lack of documentation and interview with the Technical Consultant (TC) and Testing Personnel (TP) #3, the laboratory failed to perform and document the annual preventive maintenance (PM) for the AFS 3D water system for 2 (September 2019 -September 2021) of 2 years reviewed. Findings include: 1. Record review revealed the lack of documentation of the annual PM for the AFS 3D water system for 2 (September 2019 - September 2021) of 2 years reviewed. 2. An interview on 9/13 /2021 at 1:10 pm, the TC and TP#3 confirmed the PM was not performed and documented.</p>