

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 23D2149889	(X3) Date Survey Completed 07/13/2021
Name of Provider or Supplier Mid Michigan Pain Specialty, Pc	Street Address, City, State 42500 Hayes Rd Suite 800, Clinton Township, 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
D3037	<p>RETENTION REQUIREMENTS CFR(s): 493.1105(a)(4)</p> <p>Proficiency testing records. Retain all proficiency testing records for at least 2 years.</p> <p>This STANDARD is not met as evidenced by: . Based on record review and interview with the Technical Consultant (TC), the laboratory failed to retain proficiency testing records for at least 2 years for 2 (2019 events 2 and 3) of 6 events reviewed. Findings include: 1. A review of the laboratory's American Proficiency Institute proficiency testing documentation revealed the following testing events were not available: a. Toxicology 2019 Event 2 b. Toxicology 2019 Event 3 2. A review of the laboratory's "Proficiency Testing and Employee Competency" policy revealed a section stating, "All proficiency results and corrective action documentation are retained for 2 years." 3. An interview on 7/13/21 at 9:55 am with the TC confirmed the laboratory did not have the two proficiency testing events from 2019 available.</p>