

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  25D0866582	<b>(X3) Date Survey Completed</b>  01/23/2020
<b>Name of Provider or Supplier</b>  Memphis Pathology Laboratory DbA Ael-Jackson Ms	<b>Street Address, City, State</b>  1020 River Oaks Drive Suite 320, Flowood, MS	
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>D6004</b>	<p><b>LABORATORY DIRECTOR RESPONSIBILITIES</b> CFR(s): 493.1407(a)(b)</p> <p>The laboratory director is responsible for the overall operation and administration of the laboratory, including the employment of personnel who are competent to perform test procedures, and record and report test results promptly, accurate, and proficiently and for assuring compliance with the applicable regulations. (a) The laboratory director, if qualified, may perform the duties of the technical consultant, clinical consultant, and testing personnel, or delegate these responsibilities to personnel meeting the qualifications of 493.1409, 493.1415, and 493.1421, respectively. (b) If the laboratory director reappoints performance of his or her responsibilities, he or she remains responsible for ensuring that all duties are properly performed.</p> <p>This STANDARD is not met as evidenced by: Based on review of records (Quality Control and Preventive Maintenance for the Ace Alera Chemistry Analyzer and the Boule Medonic Hematology Analyzer, Proficiency Testing, Quality Assurance) during survey on 1/23/2020 and interview with the current laboratory director/technical consultant (LD/TC) at 2:30 pm 1/23/2020, the previous laboratory director (LD) did not provide oversight for the laboratory for a period of 18 months before a new LD was hired as a replacement. Findings include: 1) There was no review of records documented by the previous Laboratory Director (LD) after 1/31/2018. The new LD first documented review of records in August 2019. 2) All records after 1/31/2018 were signed in August 2019 or later by the new LD named on 7/18/2019. 3) Interview with the current LD/TC confirmed that there was no active LD for a period of 18 months from 1/31/2018 until 8/8/2019.</p>
<b>D6049</b>	<p><b>TECHNICAL CONSULTANT RESPONSIBILITIES</b> CFR(s): 493.1413(b)(8)(iii)</p> <p>The procedures for evaluation of the competency of the staff must include, but are not</p>

limited to review of intermediate test results or worksheets, quality control records, proficiency testing results, and preventive maintenance records.

This STANDARD is not met as evidenced by:

Based on review of records (Quality Control and Preventive Maintenance for the Ace Alera Chemistry Analyzer and the Boule Medonic Hematology Analyzer, Proficiency Testing, Quality Assurance) during survey on 1/23/2020 and interview with the current laboratory director/technical consultant (LD/TC) at 2:30 pm 1/23/2020, there was no documented review of records by the previous Technical Consultant (TC) for a period of 18 months. Findings include: 1) There was no review of records documented by the previous Technical Consultant (TC) after 1/31/2018. The new TC first documented review of records in August 2019. 2) All records after 1/31/2018 were signed in August 2019 or later by the new TC. 3) Interview with the current LD /TC confirmed that there was no documented review of intermediate test results or worksheets, quality control records, proficiency testing results, and preventive maintenance records for a period of 18 months from 1/31/2018 until 8/8/2019.