

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 25D2085729	(X3) Date Survey Completed 06/17/2025
Name of Provider or Supplier Auzenne Pain Institute	Street Address, City, State 4803 29th Ave Ste A, Meridian, MS	
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>(a)(1) 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 review of maintenance records from 4/14/2023 through 6/3/2025 for the AB Sciex Triple Quad 4500 Series liquid chromatograph/mass spectrophotometer (LC/MS) system, used for urine drug screen confirmation testing, and interview with the general supervisor on 6/17/2025 at 12:15 p.m., the laboratory failed to ensure annual preventive maintenance, required by the manufacturer, was performed on the LC/MS system for two years since the last survey on 4/14/2023. Findings include: 1. Review of maintenance records, from the last survey on 4/14/2023 through 6/3/2025, for the AB Sciex Triple Quad 4500 Series LC/MS system revealed no documentation of the annual preventive maintenance (PM) required by the manufacturer. Two of two years of annual required preventive maintenance was not performed. 2. In an interview on 6/17/2025 at 12:15 p.m., the general supervisor stated the annual preventive maintenance had not been performed since June 2022.</p>