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| Statement of Deficiencies | (X1) Provider/Supplier/CLIA Identification Number 28D0455326 | (X3) Date Survey Completed 01/12/2021 |
| Name of Provider or Supplier Women's Clinic Of Lincoln | Street Address, City, State 220 Lyncrest Drive, Lincoln, NE | |
| 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 |
|---------------------------|---|
| D5417 | <p>TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(d)</p> <p>Reagents, solutions, culture media, control materials, calibration materials, and other supplies must not be used when they have exceeded their expiration date, have deteriorated, or are of substandard quality.</p> <p>This STANDARD is not met as evidenced by: Based on surveyor review of the list of tests performed, direct observation, and interview with testing personnel, the laboratory failed to ensure testing personnel did not use expired reagents. The findings include: 1. Review of the list of tests performed submitted by the laboratory revealed wet mounts/potassium hydroxide (KOH) preps are performed by the laboratory. 2. Direct observation on 1/12/2021, at 11AM, revealed the KOH solution bottle in the laboratory expired on 9/26/2020. 3. The testing personnel confirmed on 1/21/2021 at 11:05AM the expired outdate of the KOH. 4. The testing personnel stated the laboratory had tested and reported 14 patients since 9/27/2020.</p> |