

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  29D2130145	<b>(X3) Date Survey Completed</b>  02/06/2019
<b>Name of Provider or Supplier</b>  Velazquez Pain Relief Center - Flamingo	<b>Street Address, City, State</b>  8845 W Flamingo Rd Ste 100, Las Vegas, NV	
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>D0000</b>	This Statement of Deficiencies was created as a result of an on-site initial CLIA survey conducted at your facility on February 6, 2019. The findings and conclusions of any investigation by the Division of Public and Behavioral Health shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.
<b>D5441</b>	<p><b>CONTROL PROCEDURES</b> CFR(s): 493.1256(a)(b)(c)(g)</p> <p>(a) For each test system, the laboratory is responsible for having control procedures that monitor the accuracy and precision of the complete analytic process. (b) The laboratory must establish the number, type, and frequency of testing control materials using, if applicable, the performance specifications verified or established by the laboratory as specified in 493.1253(b)(3). (c) The control procedures must-- (c)(1) Detect immediate errors that occur due to test system failure, adverse environmental conditions, and operator performance. (c)(2) Monitor over time the accuracy and precision of test performance that may be influenced by changes in test system performance and environmental conditions, and variance in operator performance. (g) The laboratory must document all control procedures performed.</p> <p>This STANDARD is not met as evidenced by: Based on a random review of quality control results from 11/07/18 through 1/11/19 and an interview with the laboratory director, the laboratory failed to monitor quality control results to detect errors that can occur from test system failures or operator performance. Findings include: 1. A random audit from 11/07/18 through 1/11/19 found that the laboratory failed to review and address quality control results that were outside of the acceptable range for the performance of toxicology screening tests using the Thermoscientific Indiko Plus analyzer. 2. The toxicology screening test performed on 12/26/18 found Opi3Qu DOAT3, Oxy1Qu DOAT3, Oxy1Qu DOAT2</p>

and BAR2Qu DOAT5 quality control results to be outside of the acceptable range with no corrective action taken. 3. The toxicology screening test performed on 1/11/19 found Creat 7.5 quality control was outside of the acceptable range with no corrective action taken. This was confirmed by the laboratory director on February 6, 2019 at approximately 11:30 AM. The laboratory performs approximately 40,440 patient Chemistry tests annually.