| **Statement of Deficiencies** | **(X1) Provider/Supplier/CLIA Identification Number** | **(X3) Date Survey Completed** |
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| | 31D0110124 | 03/18/2025 |
| **Name of Provider or Supplier** | **Street Address, City, State** | |
| Valley Pediatric Associates | 470 N Franklin Turnpike, Ramsey, NJ | |

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 |
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| **D5413** | TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT<br>CFR(s): 493.1252(b)<br><br>(b) The laboratory must define criteria for those conditions that are essential for proper storage of reagents and specimens, accurate and reliable test system operation, and test result reporting. The criteria must be consistent with the manufacturer's instructions, if provided. These conditions must be monitored and documented and, if applicable, include the following: (b)(1) Water quality. (b)(2) Temperature. (b)(3) Humidity. (b)(4) Protection of equipment and instruments from fluctuations and interruptions in electrical current that adversely affect patient test results and test reports.<br><br>This STANDARD is not met as evidenced by:<br>Based on surveyor review of the Temperature Logs (TL) and interview with Testing Personnel (TP), the laboratory failed to have ad defined range for the Incubator on the TL from 10/26/23 to 3/18/25. The finding includes: 1. There was no defined range for the incubator on the TL logs. 2. The TL did not state if the temperature was recorded in degrees Fahrenheit or degrees Celsius. 3. The TP #1 as stated on the CMS 209 form confirmed on 3/18/25 at 11:00 am, the TL did not have a defined range or state if recorded in degrees Fahrenheit or Celsius. Note: This deficiency was previously cited on the survey performed on 10/25/23. |
| **D5801** | TEST REPORT<br>CFR(s): 493.1291(a)<br><br>(a) The laboratory must have an adequate manual or electronic system(s) in place to ensure test results and other patient-specific data are accurately and reliably sent from the point of data entry (whether interfaced or entered manually) to final report destination, in a timely manner. This includes the following: (a)(1) Results reported from calculated data. (a)(2) Results and patient-specific data electronically reported to |

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| | network or interfaced systems. (a)(3) Manually transcribed or electronically transmitted results and patient-specific information reported directly or upon receipt from outside referral laboratories, satellite or point-of-care testing locations.<br><br>This STANDARD is not met as evidenced by:<br>Based on surveyor review of the Electronic Medical Records (EMR), Manual Accession Log (MAL) and interview with the Testing Personnel (TP), the laboratory failed to ensure that laboratory results are accurately and reliably transcribed into the EMR for Urine Colony Count (UCC) tests from 9/20/24 to 3/18/25. The findings include: 1. Specimen identification number 2347 had a final read time for UCC stated as 9/20/24 at 2:00pm on the MAL, but The EMR report stated the final result date and time was 9/20/24 at 10:24 am. 2. Specimen identification number 41163 had a final read time for UCC stated as 9/27/24 at 5:00pm on the MAL, but The EMR report stated the final result date and time was 9/27/24 at 10:07 am. 3. TP # 1 as listed on CMS form 209, confirmed on 3/18/25 at 11:40 am, the laboratory failed to ensure that laboratory results were accurately and reliably transcribed into the EMR. |