Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 31D0120264	(X3) Date Survey Completed 04/12/2023
Name of Provider or Supplier Cape May County Department Of Health	**Street Address, City, State** 6 Moore Road, Cape May Court House, 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
D5401	PROCEDURE MANUAL CFR(s): 493.1251(a) A written procedures manual for all tests, assays, and examinations performed by the laboratory must be available to, and followed by, laboratory personnel. Textbooks may supplement but not replace the laboratory's written procedures for testing or examining specimens. This STANDARD is not met as evidenced by: Based on surveyor review of the Procedure Manual (PM), and interview with the Testing personnel (TP), the laboratory failed to have a complete procedure for Direct Wet Mount Preparation and Potassium Hydroxide testing on the date of survey. The TP confirmed on 4/12/23 at 10:00 am that the laboratory did not have the aforementioned procedure.
D5801	TEST REPORT CFR(s): 493.1291(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 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. This STANDARD is not met as evidenced by: Based on surveyor review of the Final Report (FR) Work Records (WR), Electronic

	Medical Record (EMR) and interview with the Testing Personnel (TP) the laboratory failed to ensure test results were reported accurately for Direct Wet Mount Preparation and Potassium Hydroxide testing into the EMR on 7/14/2022 and 8/16/22. The finding includes: 1. A review of eight EMR entries revealed two patient had results as follows: a) Whit Blood Cell (WBC) positive but the EMR had no result for WBC on 7 /14/23. b) Yeast Positive but the EMR had no results for Yeast on 8/16/23 c) The EMR had Hyphae: present but the WR had no result for Hyphae on 8/16/23 2. The TP confirmed on 4/12/23 at 11:30 am that the laboratory did not ensure test results were accurately recorded in the EMR.