

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 31D0679767	<b>(X3) Date Survey Completed</b> 03/24/2026
<b>Name of Provider or Supplier</b> Hackensack Meridian Health Network	<b>Street Address, City, State</b> 1030 St Georges Ave, Avenel, NJ	
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>D6029</b>	<p><b>LABORATORY DIRECTOR RESPONSIBILITIES</b> CFR(s): 493.1407(e)(11)</p> <p>(e)(11) Ensure that prior to testing patients specimens, all personnel have the appropriate education and experience, receive the appropriate training for the type and complexity of the services offered, and have demonstrated that they can perform all testing operations reliably to provide and report accurate results;</p> <p>This STANDARD is not met as evidenced by: Based on surveyor review of the Personnel Files (PF) and interview with the Office Manager (OM), the Laboratory Director (LD) failed to have appropriate education documentation on all TP performing laboratory testing on 3/11/26. The finding includes: 1. The laboratory did not have education records for one out of five TP listed on the CMS form 209. 2. The OM confirmed on 3/24/26 at 12:00 pm the above record was not on file.</p>