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| <b>Statement of Deficiencies</b>                                                                                           | <b>(X1) Provider/Supplier/CLIA Identification Number</b><br><br>31D0894713 | <b>(X3) Date Survey Completed</b><br><br>07/31/2026 |
| <b>Name of Provider or Supplier</b><br><br>Rnj Services Inc                                                                | <b>Street Address, City, State</b><br><br>35-37 Progress St, Edison, 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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| D0000              | A proficiency testing desk review survey was performed on July 31, 2026, the laboratory was found not in compliance with the following CONDITION LEVEL DEFICIENCIES D2016 - 42 C.F.R. 493.803 Condition: Successful participation proficiency testing. D6000 - 42 C.F.R. 493.1403 Condition: Laboratories performing moderate complexity testing; laboratory director                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| D2097              | <p>ROUTINE CHEMISTRY<br/>CFR(s): 493.841(g)</p> <p>(g) Failure to achieve an overall testing event score of satisfactory performance for two consecutive testing events or two out of three consecutive testing events is unsuccessful performance.</p> <p>This STANDARD is not met as evidenced by:<br/>Based on review of the CASPER 155 report and graded results from the College of American Pathologists (CAP). The laboratory failed to achieve satisfactory performance (80% or greater) for two consecutive events in the subspecialty Routine Chemistry for the analyte Total Bilirubin (TBIL), resulting in initial unsuccessful performance. The findings include: 1) A review of the CASPER 155 report revealed the following. a) The laboratory scored 60% for TBIL in event 1-2026. b) The laboratory scored 0% for TBIL in event 2-2026. 2. A review of CAP graded results confirmed the laboratory failed two consecutive Proficiency Testing (PT) events.</p> |
| D6000              | <p>MODERATE COMPLEXITY LABORATORY DIRECTOR<br/>CFR(s): 493.1403</p> <p>The laboratory must have a director who meets the qualification requirements of 493.1405 of this subpart and provides overall management and direction in accordance with 493.1407 of this subpart.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |

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|              | <p>This CONDITION is not met as evidenced by:<br/>Based on review of the CASPER 155 report and graded results from the College of American Pathologists (CAP). The Laboratory Director (LD) failed to provide overall management and direction to laboratory personnel to ensure that the Proficiency Testing (PT) surveys are performed satisfactorily and in compliance with Clinical Laboratory Improvement Amendments (CLIA) regulations. The findings include: 1. The LD failed to ensure PT surveys are performed satisfactorily and in compliance with CLIA regulations. Cross refer to D6016.</p>                                                       |
| <b>D6016</b> | <p><b>LABORATORY DIRECTOR RESPONSIBILITIES</b><br/>CFR(s): 493.1407(e)(4)(i)</p> <p>(e)(4)(i) The proficiency testing samples are tested as required under Subpart H of this part;</p> <p>This STANDARD is not met as evidenced by:<br/>Based on a review of the CASPER 155 report and graded results from College Of American Patholgiosts (CAP) the Laboratory Director (LD) failed to ensure successful participation in a Department of Health and Human Services (DHHS) approved Proficiency Testing (PT) program for two consecutive PT events for the analyte Total Bilirubin (TBIL), resulting in initial unsuccessful performance. Refer to D2097.</p> |