

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 31D2041037	(X3) Date Survey Completed 10/14/2021
Name of Provider or Supplier Titan Health Partners Llc	Street Address, City, State One Exchange Place, Jersey City, 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
D5807	<p>TEST REPORT CFR(s): 493.1291(d)</p> <p>Pertinent "reference intervals" or "normal" values, as determined by the laboratory performing the tests, must be available to the authorized person who ordered the tests and, if applicable, the individual responsible for using the test results.</p> <p>This STANDARD is not met as evidenced by: Based on surveyor review of the Final Report (FR) and interview with the Testing Personnel (TP), the laboratory failed to ensure that the Normal Reference Intervals (NRI) were indicated on the FR for Hematology from July 2018 to the date of survey. The TP confirmed on 10/14/21 at 11:35 am that the NRI were not on the FR. Note: This was previously cited 9/12/18</p>