

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  31D2152136	<b>(X3) Date Survey Completed</b>  10/21/2021
<b>Name of Provider or Supplier</b>  Heymann, Manders, Green & Sommer, Llc	<b>Street Address, City, State</b>  10000 Sagemore Drive, Marlton, 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>D5429</b>	<p>MAINTENANCE AND FUNCTION CHECKS CFR(s): 493.1254(a)(1)</p> <p>For unmodified manufacturer's equipment, instruments, or test systems, the laboratory must perform and document maintenance as defined by the manufacturer and with at least the frequency specified by the manufacturer.</p> <p>This STANDARD is not met as evidenced by: Based on the lack of the Maintenance Records (MR) and interview with the Tetsing Personnl (TP), the laboratory failed to perform and document preventative maintenance as specified by the manufacturer on the Leica TP1020 Automatic Benchtrop Tissue Processor and Tissue-Tek TEC 6 for Histopathology tests from Spetember 2021 to the date of the survey. The TP confirmed on 10/19/21 at 1:15 pm that yearly maintenance as specified by the manufacturer was not performed.</p>