

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  31D2155829	<b>(X3) Date Survey Completed</b>  01/19/2022
<b>Name of Provider or Supplier</b>  Vanguard Medical, Pa	<b>Street Address, City, State</b>  16 Pocono Road, Suite 310, Denville, 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>D5601</b>	<p><b>HISTOPATHOLOGY</b> CFR(s): 493.1273(a)(f)</p> <p>(a) As specified in 493.1256(e)(3), fluorescent and immunohistochemical stains must be checked for positive and negative reactivity each time of use. For all other differential or special stains, a control slide of known reactivity must be stained with each patient slide or group of patient slides. Reactions of the control slide with each special stain must be documented. (f) The laboratory must document all control procedures performed, as specified in this section.</p> <p>This STANDARD is not met as evidenced by: Based on surveyor review of Quality Control (QC) records and interview with the Laboratory Director (LD), the laboratory failed to document the reaction of the Hematoxylin and Eosin stain used for Histopathology tests from 6/6/19 to the date of the survey. The LD confirmed on 1/19/22 at 11:30 am that the laboratory did not document reaction of stains.</p>