

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 31D2177369	(X3) Date Survey Completed 10/25/2023
Name of Provider or Supplier Pierre J Mendoza Md	Street Address, City, State 9 Mule Road, Toms River, 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
D5629	<p>CYTOLOGY CFR(s): 493.1274(c)(5)</p> <p>(c) Control procedures. The laboratory must establish and follow written policies and procedures for a program designed to detect errors in the performance of cytologic examinations and the reporting of results. The program must include the following: (c) (5) An annual statistical laboratory evaluation of the number of - (c)(5)(i) Cytology cases examined; (c)(5)(ii) Specimens processed by specimen type; (c)(5)(iii) Patient cases reported by diagnosis (including the number reported as unsatisfactory for diagnostic interpretation); (c)(5)(iv) Gynecologic cases with a diagnosis of HSIL, adenocarcinoma, or other malignant neoplasm for which histology results were available for comparison; (c)(5)(v) Gynecologic cases where cytology and histology are discrepant; and (c)(5)(vi) Gynecologic cases where any rescreen of a normal or negative specimen results in reclassification as low-grade squamous intraepithelial lesion (LSIL), HSIL, adenocarcinoma, or other malignant neoplasms.</p> <p>This STANDARD is not met as evidenced by: Based on the lack of laboratory annual statistics and a procedure for evaluating and comparing such statistics and interview with the Laboratory Consultant (LC), the laboratory failed to provide statistics and establish a written procedure for the evaluation and comparison of three of the three required statistics for nongynecologic cytology from 8/26/21 to the date of survey. Findings include: 1. The laboratory failed to provide an evaluation of three of the three required statistics. Statistics include: a. The number of cytology cases examined; b. The number of specimens processed by specimen type; c. The number of patient cases reported by diagnosis to include unsatisfactory. 2. The laboratory failed to provide a written policy for an annual statistical evaluation of the three required statistics for nongynecologic specimens. 3. The LC confirmed on 10/25/23 at 2:00 pm the laboratory did not have the above statistics and procedure.</p>