

<p>Statement of Deficiencies</p>	<p>(X1) Provider/Supplier/CLIA Identification Number</p> <p>32D2163600</p>	<p>(X3) Date Survey Completed</p> <p>08/26/2025</p>
<p>Name of Provider or Supplier</p> <p>New Mexico Foot & Ankle Institute</p>	<p>Street Address, City, State</p> <p>4343 Pan American Freeway Ne #234, Albuquerque, NM</p>	
<p>For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.</p>		

<p>(X4) ID Prefix Tag</p>	<p>Summary Statement of Deficiencies</p>
<p>D2009</p>	<p>TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)(1)</p> <p>(b)(1) The individual testing or examining the samples and the laboratory director must attest to the routine integration of the samples into the patient workload using the laboratory's routine methods.</p> <p>This STANDARD is not met as evidenced by: Based on review of the laboratory's "Proficiency and Split Sample Policy for Thermo Quant Flex Testing" (PT Procedure); review of the American Proficiency Institute (API) Microbiology proficiency testing (PT) records; lack of documentation; and interview with the Chief Operating Officer (COO), the laboratory failed to have testing personnel (TP) and the laboratory director (LD) attest to the integration of PT samples with routine testing of patient samples during the API Microbiology 2024 3rd Event, 2025 1st event, and 2025 2nd event. Findings include: 1. Review of the PT Procedure indicated the LD and TP are required to sign the attestation form upon completion of proficiency testing. 2. A review of the API Microbiology PT records revealed no attestation forms for API Microbiology 2024 3rd event, 2025 1st event, and 2025 2nd event. 3. The laboratory failed to produce requested attestation forms signed upon completion of testing. 4. Interview with the COO on 8/26/2025 at 10:27 am confirmed the above findings. 5. The laboratory reports 15840 microbiology tests annually.</p>
<p>D6091</p>	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(4)(iii)</p> <p>(e)(4)(iii) All proficiency testing reports received are reviewed by the appropriate staff to evaluate the laboratory's performance and to identify any problems that require corrective action; and</p>

This STANDARD is not met as evidenced by:

Based on review of the laboratory's "Proficiency and Split Sample Policy for Thermo Quant Flex Testing" (PT Procedure); review of the American Proficiency Institute (API) Microbiology proficiency testing (PT) records; lack of documentation; and interview with the Chief Operating Officer (COO), the laboratory director (LD) failed to ensure proficiency testing reports were reviewed by the appropriate staff for the API Microbiology 2024 3rd Event, 2025 1st event, and 2025 2nd event. Findings include: 1. Review of the PT Procedure stated the following: a. "All proficiency test results are reviewed for acceptability according to established acceptance parameters for patient samples." b. "Documentation of this review is to be kept in the records for no less than two years after receiving the PT survey results." 2. Review of the API Microbiology PT records showed no documentation of review for the API Microbiology 2024 3rd Event, 2025 1st event, and 2025 2nd event. 3. The laboratory failed to provide requested records indicating review of the API Microbiology 2024 3rd Event, 2025 1st event, and 2025 2nd event. 4. Interview with the COO on 8/26 /2025 at 10:27 am confirmed the above findings. 5. The laboratory reports 15840 microbiology tests annually.