

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  33D0931719	<b>(X3) Date Survey Completed</b>  05/01/2019
<b>Name of Provider or Supplier</b>  Hudson Valley Hematology-Oncology Associates Rllp	<b>Street Address, City, State</b>  159 Barnegat Road, Suite 101, Poughkeepsie, NY	
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>D2007</b>	<p><b>TESTING OF PROFICIENCY TESTING SAMPLES</b> CFR(s): 493.801(b)(1)</p> <p>The samples must be examined or tested with the laboratory's regular patient workload by personnel who routinely perform the testing in the laboratory, using the laboratory's routine methods</p> <p>This STANDARD is not met as evidenced by: Based on the surveyor's review of American Proficiency Institute (API) proficiency testing (PT) records for the second and third events of 2017, and all three events events of 2018, and an interview with the primary testing person, the laboratory failed to rotate the PT samples among all testing personnel who routinely perform hematology testing on the hematology instrument. Findings: A review of the PT attestation statements, and confirmed by the primary testing person, on the date of the onsite survey at 10:15 AM, 5 out of 5 hematology challenges were tested by the primary testing person.</p>
<b>D6016</b>	<p><b>LABORATORY DIRECTOR RESPONSIBILITIES</b> CFR(s): 493.1407(e)(4)(i)</p> <p>The laboratory director is responsible for the overall operation and administration of the laboratory, including the employment of personnel who are competent to perform test procedures, and record and report test results promptly, accurate, and proficiently and for assuring compliance with the applicable regulations. (e) The laboratory director must-- (e)(4)(i) Ensure that the proficiency testing samples are tested as required under Subpart H of this part;</p> <p>This STANDARD is not met as evidenced by:</p>

Based on the surveyor's review of PT records and confirmed in an interview with the primary testing person, the laboratory director failed to ensure that hematology PT specimens were tested in the same manner as patient specimens. Refer to D2007