

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 33D2105323	(X3) Date Survey Completed 10/25/2018
Name of Provider or Supplier Shariyar Hadi Do Pc	Street Address, City, State 507 Fulton Avenue, Hempstead, NY	
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
D5217	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1)</p> <p>At least twice annually, the laboratory must verify the accuracy of any test or procedure it performs that is not included in subpart I of this part.</p> <p>This STANDARD is not met as evidenced by: Based on surveyor's review of the laboratory's available records and confirmed in an interview with the technical supervisor and the testing person, the laboratory failed to have a system in place for checking the accuracy of Oral Fluid Toxicology testing at least twice yearly and failed to document corrective action when twice per year verification failed for Urine Toxicology for 50 out of 50 drugs tested in May 2018. Findings: 1) The laboratory initiated Oral Fluid Toxicology testing in April 2018. The laboratory failed to have a system in place for at least twice yearly verifying the accuracy of Oral Fluid Toxicology testing. 2) The laboratory performs twice per year verification for accuracy (split sample study) for analytes not covered in the Urine Toxicology Proficiency Testing Program. On October 25, 2018 at approximately 11:30 AM the technical supervisor and the testing person confirmed that the laboratory failed to document corrective action when 50 out of 50 drug testing results did not correlate within the laboratory's established parameters in May 2018.</p>
D5311	<p>SPECIMEN SUBMISSION, HANDLING, AND REFERRAL CFR(s): 493.1242(a)</p> <p>The laboratory must establish and follow written policies and procedures for each of the following, if applicable: (1) Patient preparation. (2) Specimen collection. (3) Specimen labeling, including patient name or unique patient identifier and, when appropriate, specimen source. (4) Specimen storage and preservation. (5) Conditions for specimen transportation. (6) Specimen processing. (7) Specimen acceptability and rejection. (8) Specimen referral.</p>

This STANDARD is not met as evidenced by:

Based on surveyor review of the laboratory's policy and procedures and interview with the technical supervisor and the testing person, the laboratory failed to follow the laboratory's written instruction for the testing process from June 2017 through the survey date. Findings: 1. The laboratory's written policy and procedure for urine toxicology specimens collection and handling requires the following: "Temperature must be between 90.5 and 99.8 degree Fahrenheit. If the sample temperature is out of range, it must be rejected." 2. On October 25, 2018 at approximately 11:30 AM the technical supervisor and the testing person confirmed surveyor finding that the laboratory does not check the urine samples temperature. The testing person confirmed that most of the urine samples are collected in a regular sterile urine collection cups without a Temperature Strip. 3. Approximately 3000 urine samples were collected, processed and results were reported from June 2017 through the survey date.