

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  33D2132521	<b>(X3) Date Survey Completed</b>  06/21/2019
<b>Name of Provider or Supplier</b>  Westchester Medical Group Pllc	<b>Street Address, City, State</b>  3030 Westchester Ave, Purchase, 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>D5417</b>	<p>TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(d)</p> <p>Reagents, solutions, culture media, control materials, calibration materials, and other supplies must not be used when they have exceeded their expiration date, have deteriorated, or are of substandard quality.</p> <p>This STANDARD is not met as evidenced by: Based on surveyor's observation of the laboratory's testing area and an interview with the laboratory manager, the laboratory failed to discontinue the use of the expired reagent used to stain peripheral smears. Findings Include: On June 21, 2019, at approximately 12:45 PM, the laboratory manager confirmed that the laboratory continued to use lot # 430861, Hema Quick hematology stain past its expiration date of November 20, 2018 through the date of this survey. Approximately 19699 patients were tested and reported for manual differentials.</p>