

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 33D2154552	(X3) Date Survey Completed 12/06/2023
Name of Provider or Supplier Crown Heights Medical Pc	Street Address, City, State 1 Main Street, Monsey, 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
D5291	<p>GENERAL LABORATORY SYSTEMS QUALITY ASSESSMENT CFR(s): 493.1239(a)</p> <p>The laboratory must establish and follow written policies and procedures for an ongoing mechanism to monitor, assess, and, when indicated, correct problems identified in the general laboratory systems requirements specified at 493.1231 through 493.1236.</p> <p>This STANDARD is not met as evidenced by: Based on review of the Quality Assessment (QA) policies and procedures as well as interview with the laboratory director (LD), the laboratory failed to comply with the approved QA policies and procedures for monitoring and, when indicated, correct problems. Findings: 1. As per the laboratory procedure manual instructions, a QA review must be performed on a yearly basis. 2. No documentation of 2022 QA performance was available for review. 3. Confirmed findings by interview with the LD on December 6th, 2023, at 2:00 P.M.</p>