| Statement of Deficiencies | (X1) Provider/Supplier/CLIA Identification Number<br><br>33D2223093 | (X3) Date Survey Completed<br><br>05/21/2025 |
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| **Name of Provider or Supplier**<br><br>Priority Private Care Pc | **Street Address, City, State**<br><br>945 5th Avenue, Suite 2, New York, 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 |
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| **D2094** | ROUTINE CHEMISTRY<br>CFR(s): 493.841(e)<br><br>(e)(1) For any unsatisfactory analyte or test performance or testing event for reasons other than a failure to participate, the laboratory must undertake appropriate training and employ the technical assistance necessary to correct problems associated with a proficiency testing failure. (2) For any unacceptable analyte or testing event score, remedial action must be taken and documented, and the documentation must be maintained by the laboratory for two years from the date of participation in the proficiency testing event.<br><br>This STANDARD is not met as evidenced by:<br>Based on review of the Centers for Medicare & Medicaid Services (CMS) Proficiency Testing (PT) Certification and Survey Provider Enhanced Reporting System (CASPER 0155D) and American Proficiency Institute (API) PT summary reports, as well as interview with the Technical Consultant (TC), the laboratory failed to perform, document, and retain remedial action for unacceptable subspecialty and analyte testing event scores. FINDINGS: a. A review of the CASPER 155 report revealed the following unsatisfactory scores: 1. Routine Chemistry Subspecialty: 2023 Second Event = 50% 2. Creatinine Kinase (CK), Total Test Analyte: 2023 Second Event = 0% b. A review of the PT scores from API (2023) summary reports confirmed the above test event findings. c. There was no documentation of plan of correction for the respective subspecialty and test analyte unsatisfactory scores. d. The TC confirmed the findings on May 21, 2025, at approximately 11:30 A.M. |
| **D2128** | HEMATOLOGY<br>CFR(s): 493.851(e)<br><br>(e)(1) For any unsatisfactory analyte or test performance or testing event for reasons other than a failure to participate, the laboratory must undertake appropriate training |

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| | and employ the technical assistance necessary to correct problems associated with a proficiency testing failure. (2) For any unacceptable analyte or testing event score, remedial action must be taken and documented, and the documentation must be maintained by the laboratory for two years from the date of participation in the proficiency testing event.<br><br>This STANDARD is not met as evidenced by:<br>Based on review of the CMS PT CASPER 0155D and API PT summary reports, as well as interview with the TC, the laboratory failed to perform, document, and retain remedial action for unacceptable specialty and analyte testing event scores. a. A review of the CASPER 155 report revealed the following unsatisfactory scores: 1. Hematology Specialty: 2022 Second Event = 0% 2. Cell Identification (ID) Test Analyte: 2022 Second Event = 0% 3. Red Blood Cell (RBC) Test Analyte: 2022 Second Event = 0% 4. Hematocrit (HCT) (Non-Waived) Test Analyte: 2022 Second Event = 0% 2024 Third Event = 60% 5. Hemoglobin (HGB) (Non-Waived) Test Analyte: 2022 Second Event = 0% 6. White Blood Cell (WBC) Count Test Analyte: 2022 Second Event = 0% 7. Platelets Test Analyte: 2022 Second Event = 0% b. A review of the PT scores from API (2022 and 2024) summary reports confirmed the above test event findings. c. There was no documentation of plan of correction for the respective specialty and test analyte unsatisfactory scores. d. The TC confirmed the findings on May 21, 2025, at approximately 11:30 A.M. |