Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number** 34D1074713	**(X3) Date Survey Completed** 09/03/2025
Name of Provider or Supplier Rainbow Pediatrics Of Fayetteville - Hope Mills	**Street Address, City, State** 4469 S Main Street, Hope Mills, NC	
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**
D2016	SUCCESSFUL PARTICIPATION CFR(s): 493.803(a)(b)(c) (a) Each laboratory performing nonwaived testing must successfully participate in a proficiency testing program approved by CMS, if applicable, as described in subpart I of this part for each specialty, subspecialty, and analyte or test in which the laboratory is certified under CLIA. (b) Except as specified in paragraph (c) of this section, if a laboratory fails to participate successfully in proficiency testing for a given specialty, subspecialty, analyte or test, as defined in this section, or fails to take remedial action when an individual fails gynecologic cytology, CMS imposes sanctions, as specified in subpart R of this part. (c) If a laboratory fails to perform successfully in a CMS-approved proficiency testing program, for the initial unsuccessful performance, CMS may direct the laboratory to undertake training of its personnel or to obtain technical assistance, or both, rather than imposing alternative or principle sanctions except when one or more of the following conditions exists: (1) There is immediate jeopardy to patient health and safety. (2) The laboratory fails to provide CMS or a CMS agent with satisfactory evidence that it has taken steps to correct the problem identified by the unsuccessful proficiency testing performance. (3) The laboratory has a poor compliance history. This CONDITION is not met as evidenced by: Based on desk review of CMS (Centers for Medicare and Medicaid Services) Casper reports 153D and 155D on 7/30/25 and desk review of 2024 and 2025 API (American Proficiency Institute) proficiency testing results 9/3/25, the laboratory failed to achieve satisfactory performance for RBC (red blood cell count) and Hemoglobin, and failed to achieve overall test event scores of satisfactory for Hematology on 2 of 3 consecutive test events, resulting in unsuccessful participation in proficiency testing. Findings: See the deficiencies cited at D2130 and D2131.
D2130	HEMATOLOGY

	CFR(s): 493.851(f) (f) Failure to achieve satisfactory performance for the same analyte in two consecutive events or two out of three consecutive testing events is unsuccessful performance. This STANDARD is not met as evidenced by: Based on desk review of CMS Casper reports 153D and 155D on 7/30/25 and desk review of 2024 and 2025 API proficiency testing results 9/3/25, the laboratory failed to achieve satisfactory performance for RBC and Hemoglobin on 2 of 3 consecutive testing events, resulting in unsuccessful performance. Findings: 1. Desk review of CMS Casper reports 153D and 155D and 2024 API proficiency testing results revealed the laboratory received a score of 20% for RBC and a score of 40% for Hemoglobin on the 2024 Hematology/Coagulation 2nd Event. 2. Desk review of CMS Casper reports 153D and 155D and 2025 API proficiency testing results revealed the laboratory received a score of 20% for RBC and a score of 40% for Hemoglobin on the 2025 Hematology/Coagulation 1st Event.
D2131	HEMATOLOGY CFR(s): 493.851(g) (g) Failure to achieve an overall testing event score of satisfactory performance for two consecutive testing events or two out of three consecutive testing events is unsuccessful performance. This STANDARD is not met as evidenced by: Based on desk review of CMS Casper reports 153D and 155D on 7/30/25 and desk review of 2024 and 2025 API proficiency testing results 9/3/25, the laboratory failed to achieve an overall test event score of satisfactory performance for Hematology on 2 of 3 consecutive testing events, resulting in unsuccessful performance. Findings: 1. Desk review of CMS Casper reports 153D and 155D and 2024 API proficiency testing results revealed the laboratory received an overall score of 73% for Hematology on the 2024 Hematology/Coagulation 2nd Event. 2. Desk review of CMS Casper reports 153D and 155D and 2025 API proficiency testing results revealed the laboratory received an overall score of 60% for Hematology on the 2025 Hematology /Coagulation 1st Event.
D6000	MODERATE COMPLEXITY LABORATORY DIRECTOR CFR(s): 493.1403 The laboratory must have a director who meets the qualification requirements of 493. 1405 of this subpart and provides overall management and direction in accordance with 493.1407 of this subpart. This CONDITION is not met as evidenced by: Based on desk review of CMS Casper reports 153D and 155D on 7/30/25 and desk review of 2024 and 2025 API proficiency testing results 9/3/25, the laboratory director failed to provide overall management and direction to ensure successful proficiency testing participation. Findings: See the deficiency cited at D6016.
D6016	LABORATORY DIRECTOR RESPONSIBILITIES

	CFR(s): 493.1407(e)(4)(i) (e)(4)(i) The proficiency testing samples are tested as required under Subpart H of this part; This STANDARD is not met as evidenced by: Based on desk review of CMS Casper reports 153D and 155D on 7/30/25 and desk review of 2024 and 2025 API proficiency testing results 9/3/25, the laboratory director failed to ensure successful participation in proficiency testing as required in Subpart H. Findings: See the deficiencies cited at D2130 and D2131.