

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 37D0857182	<b>(X3) Date Survey Completed</b> 03/02/2021
<b>Name of Provider or Supplier</b> Southwest Pathology, Inc	<b>Street Address, City, State</b> 8803 S 101st E Ave, Suite 360, Tulsa, OK	
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>D0000</b>	The recertification survey was performed on 03/02/2021. The findings were reviewed with the laboratory director, technical supervisor #2/general supervisor #2, and the office manager during an exit conference performed at the conclusion of the survey. The laboratory was found in compliance with standard-level deficiencies cited.
<b>D5209</b>	<p><b>PERSONNEL COMPETENCY ASSESSMENT POLICIES</b> CFR(s): 493.1235</p> <p>As specified in the personnel requirements in subpart M, the laboratory must establish and follow written policies and procedures to assess employee and, if applicable, consultant competency.</p> <p>This STANDARD is not met as evidenced by: Based on a review of policies and procedures, and interview with the office manager, the laboratory failed to have written policies and procedures for assessing employee competency. Findings include: (1) On 03/02/2021, the surveyor reviewed the laboratory's written policies and procedures titles, Histology and Cytology Policy and Procedure Manual. A policy that explained how the technical supervisor and general supervisor were assessed for competency could not be located; (2) The surveyor asked the office manager if a competency policy for the technical supervisor and general supervisor was available for review. The office manager stated on 03/02/2021 at 11:05 am a competency assessment policy for the technical supervisor and general supervisor based on job responsibilities had not been written.</p>
<b>D5805</b>	<p><b>TEST REPORT</b> CFR(s): 493.1291(c)</p> <p>The test report must indicate the following: (c)(1) For positive patient identification, either the patient's name and identification number, or a unique patient identifier and identification number. (c)(2) The name and address of the laboratory location where</p>

the test was performed. (c)(3) The test report date. (c)(4) The test performed. (c)(5) Specimen source, when appropriate. (c)(6) The test result and, if applicable, the units of measurement or interpretation, or both. (c)(7) Any information regarding the condition and disposition of specimens that do not meet the laboratory's criteria for acceptability.

This STANDARD is not met as evidenced by:

Based on a review of records and interview with the office manager and laboratory director, the laboratory failed to ensure patient test reports included the full address of the laboratory location for 9 of 9 reports. Findings include: (1) On 03/02/2021, the surveyor reviewed 9 patient test reports as follows: (a) Report #1 - Histopathology slide interpretation was performed with the results reported on 01/10/2019; (b) Report #2 - Histopathology slide interpretation was performed with the results reported on 02/18/2019; (c) Report #3 - Histopathology slide interpretation was performed with the results reported on 05/10/2019; (d) Report #4- Histopathology slide interpretation was performed with the results reported on 07/17/2019; (e) Report #5 - Histopathology slide interpretation was performed with the results reported on 09/30/2019; (f) Report #6 - Histopathology slide interpretation was performed with the results reported on 10/08/2019; (g) Report #7 - Histopathology slide interpretation was performed with the results reported on 01/16/2020; (h) Report #8 - Histopathology slide interpretation was performed with the results reported on 01/31/2020; (i) Report #9 - Histopathology slide interpretation was performed with the results reported on 08/03/2020. (2) The surveyor identified that the address of the laboratory on the reports was "8803 S. 101st East Ave, Suite, Tulsa, OK" which did not match the physical location on the CLIA Certificate of 8803 S. 101st East Ave, Suite 360, Tulsa, OK; (3) The surveyor reviewed the reports with the laboratory office manager. The office manager stated on 03/02/2021 at 12:40 pm the full address of the laboratory location where testing was performed on the report did not match the CLIA certificate.