

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  37D1015844	<b>(X3) Date Survey Completed</b>  12/19/2023
<b>Name of Provider or Supplier</b>  Fallingwater Medical Associates Pllc	<b>Street Address, City, State</b>  2434 Harville Rd, Ste 100, Duncan, 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 12/19/2023. The laboratory was found in compliance with standard-level deficiencies cited. The findings were reviewed with the office manager and testing person #1 at the conclusion of the survey.
<b>D2015</b>	<p><b>TESTING OF PROFICIENCY TESTING SAMPLES</b> CFR(s): 493.801(b)(5)(6)</p> <p>(5) The laboratory must document the handling, preparation, processing, examination, and each step in the testing and reporting of results for all proficiency testing samples. The laboratory must maintain a copy of all records, including a copy of the proficiency testing program report forms used by the laboratory to record proficiency testing results including the attestation statement provided by the PT program, signed by the analyst and the laboratory director, documenting that proficiency testing samples were tested in the same manner as patient specimens, for a minimum of two years from the date of the proficiency testing event. (6) PT is required for only the test system, assay, or examination used as the primary method for patient testing during the PT event.</p> <p>This STANDARD is not met as evidenced by: Based on a review of records and interview with testing person #1, the laboratory failed to ensure proficiency testing attestation records had been signed by the laboratory director for one of six events reviewed. Findings include: (1) On 12/19 /2023 at 11:30 am, a review of 2022 and 2023 proficiency testing records identified the following for one of six events: (a) 2023 Hematology - First Event (i) The attestation statement had not been signed by the laboratory director. (2) The findings were reviewed with the office manager and testing person #1. Both stated on 12/19 /2023 at 1:00 pm, the attestation statement had not been signed by the laboratory director.</p>