

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 37D2031089	<b>(X3) Date Survey Completed</b> 05/02/2024
<b>Name of Provider or Supplier</b> Diagnostic Pathology Services, Inc	<b>Street Address, City, State</b> 4801 Integris Parkway, Edmond, 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 05/02/2024. The laboratory was found in compliance with standard level deficiencies cited. The findings were reviewed with the quality assurance specialist at the conclusion of the survey.
<b>D3043</b>	<p><b>RETENTION REQUIREMENTS</b> CFR(s): 493.1105(a)(7)</p> <p>The laboratory must retain cytology slide preparations for at least 5 years from the date of examination (see 493.1274(f) for proficiency testing exception). The laboratory must retain histopathology slides for at least 10 years from the date of examination. The laboratory must retain pathology specimen blocks for at least 2 years from the date of examination. The laboratory must preserve remnants of tissue for pathology examination until a diagnosis is made on the specimen.</p> <p>This STANDARD is not met as evidenced by: Based on a review of patient frozen section slides and interview with the QA (quality assurance) specialist, the laboratory failed to ensure that patient slides were available for review during the survey for two of nine patients. Findings include: (1) On 05/02/2024 at 10:00 am, the QA specialist stated the following to the surveyor: (a) The laboratory prepared frozen sections using the Leica CM1850 Cryostat; (b) The slides were stained with H&amp;E (Hematoxylin &amp; Eosin), then reviewed microscopically by the pathologists. (2) A review of patient frozen section slides for nine patients with microscopic interpretations performed in 2022 and 2023 identified slides could not be retrieved for two of nine patients as follows: (a) Patient# HS-22-0001955 - results were reported on 12/27/2022 (b) Patient# HS-23-0001400) - results were reported on 07/28/2023 (3) The QA specialist stated to the surveyor on 05/02/2024 at 12:22 pm, the slides for the two patients could not be located during the survey.</p>
<b>D5217</b>	<p><b>EVALUATION OF PROFICIENCY TESTING PERFORMANCE</b> CFR(s): 493.1236(c)(1)</p>

At least twice annually, the laboratory must verify the accuracy of any test or procedure it performs that is not included in subpart I of this part.

This STANDARD is not met as evidenced by:

Based on a review of records and interview with the QA (quality assurance) specialist, the laboratory failed to verify the accuracy of slide interpretations at least twice annually during the review period of August 2022 through the current date. Findings include: (1) On 05/02/2024 at 10:00 am, the QA specialist stated the laboratory performed microscopic slide interpretations of H&E (Hematoxylin and Eosin) stained slides from frozen tissues. The tissue would then be observed microscopically; (2) A review of records from August 2022 through the current date identified no evidence the accuracy of slide interpretations had been verified at least twice annually between 08/01/2022 and 02/29/2024; (3) The records were reviewed with the QA specialist who stated on 05/02/2024 at 11:05 am, the slide interpretations had not been verified for accuracy twice annually as stated above.