

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  38D0622888	<b>(X3) Date Survey Completed</b>  06/25/2018
<b>Name of Provider or Supplier</b>  Physicians' Medical Center Lab	<b>Street Address, City, State</b>  2435 Ne Cumulus Ave Suite A, McMinnville, OR	
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>D5417</b>	<p>TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(d)</p> <p>Reagents, solutions, culture media, control materials, calibration materials, and other supplies must not be used when they have exceeded their expiration date, have deteriorated, or are of substandard quality.</p> <p>This STANDARD is not met as evidenced by: Based on inspection of reagents in the laboratory and discussion with one of the Technical Supervisors (TS), the laboratory was using expired reagents. Findings include: 1. Three (3) out of four (4) of the Gram stain reagents in the Microbiology area were expired as follows: Crystal Violet expired 3/30/2018 Grams Iodine expired 3/31/2018 Safranin expired 4/6/2018 2. Potassium hydroxide (KOH) used for wet mounts showed an expiration date of 3/17/2016.</p>