Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number** 39D0657558	**(X3) Date Survey Completed** 10/26/2022
Name of Provider or Supplier Hematology Oncology Assoc Of Ne Pa Pc Lab	**Street Address, City, State** 1100 Meade Street, Dunmore, PA	
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**
D6018	LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1407(e)(4)(iii) The laboratory director is responsible for the overall operation and administration of the laboratory, including the employment of personnel who are competent to perform test procedures, and record and report test results promptly, accurate, and proficiently and for assuring compliance with the applicable regulations. (e) The laboratory director must-- (e)(4)(iii) Ensure that all proficiency testing reports received are reviewed by the appropriate staff to evaluate the laboratory's performance and to identify any problems that require corrective action; This STANDARD is not met as evidenced by: Based on review of the College of American Pathologists (CAP) proficiency testing (PT) records and an interview with the Laboratory Supervisor (LS), the laboratory director failed to ensure 1 of 3 CAP 2021 Hematology Auto Differentials PT events received was reviewed to identify the unacceptable PT that required corrective action. Findings include: 1. On the day of survey, 10/26/2022 at 11:09 AM, a review of the CAP PT records revealed an unacceptable Hematology Auto Differentials H9-C, PT event 3, 2021. 2. The laboratory could not provide documentation of corrective action for the unacceptable PT score. 3. The LS confirmed the findings above on 10/26/2022 at 12:30 PM.