

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 39D2130307	(X3) Date Survey Completed 02/26/2019
Name of Provider or Supplier Religen Inc	Street Address, City, State 5110 Campus Drive, Suite 120, Plymouth Meeting, 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
D6127	<p>TECHNICAL SUPERVISOR RESPONSIBILITIES CFR(s): 493.1451(b)(9)</p> <p>The technical supervisor is responsible for evaluating and documenting the performance of individuals responsible for high complexity testing at least semiannually during the first year the individual tests patient specimens.</p> <p>This STANDARD is not met as evidenced by: Based on review of the competency records and interview of the Laboratory Manager and the Senior Laboratory Technician at the time of survey (09:30 02/26/2019), the Technical Supervisor failed to document the competency of all testing personnel who performed mitochondrial function testing from January 2018 to the date of survey. Findings include: 1. On the date of the survey (02/26/2019), annual competency was not documented for 1 of 2 testing personnel. 2. During the survey, the Laboratory Manager confirmed above finding.</p>