

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 42D0706461	(X3) Date Survey Completed 06/22/2021
Name of Provider or Supplier Articularis Healthcare Group, Inc	Street Address, City, State 2015 2nd Ave, Summerville, SC	
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
D2006	<p>TESTING OF PROFICIENCY TESTING SAMPLES CFR(s): 493.801(b)</p> <p>The laboratory must examine or test, as applicable, the proficiency testing samples it receives from the proficiency testing program in the same manner as it tests patient specimens. This testing must be conducted in conformance with paragraph (b)(4) of this section. If the laboratory's patient specimen testing procedures would normally require reflex, distributive, or confirmatory testing at another laboratory, the laboratory should test the proficiency testing sample as it would a patient specimen up until the point it would refer a patient specimen to a second laboratory for any form of further testing.</p> <p>This STANDARD is not met as evidenced by: During an onsite recertification survey on 6/22/21, based on observing documentation and personnel interview, the laboratory failed to sign the attestation statement of the proficiency testing packet Findings include 1.Observation of the proficiency testing packet for Chemistry showed that attestation statements for events A,B and C for 2018, 2019, and 2020 weren't signed by lab director. 2.Observation of the proficiency testing packet for Hematology showed that attestation statements for events A,B and C for 2018, 2019, and 2020 were not signed by lab director. 3. During an onsite interview with staff at 12:22pm, staff stated that the lab director had failed to sign the attestation statements.</p>