

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 42D0999469	<b>(X3) Date Survey Completed</b> 06/02/2026
<b>Name of Provider or Supplier</b> Palmetto Pediatrics Of The Lowcountry,	<b>Street Address, City, State</b> 4 Okatie Center Blvd South, Suite 201, Okatie, SC	
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>	An announced onsite CLIA recertification survey was conducted on June 2, 2026, at the laboratory of Palmetto Pediatrics of the Lowcountry of Okatie by the South Carolina Department of Public Health (SC DPH) Bureau of Nursing Homes and Medical Services. The laboratory was found to be out of compliance with Medicare condition 42 CFR Part 493, CLIA requirements for laboratories. The following is a list of deficiencies cited as a result of the June 2, 2026 recertification survey:
<b>D6029</b>	<p><b>LABORATORY DIRECTOR RESPONSIBILITIES</b> CFR(s): 493.1407(e)(11)</p> <p>(e)(11) Ensure that prior to testing patients specimens, all personnel have the appropriate education and experience, receive the appropriate training for the type and complexity of the services offered, and have demonstrated that they can perform all testing operations reliably to provide and report accurate results;</p> <p>This STANDARD is not met as evidenced by: Based on records review, lack of documentation, and staff interview, the laboratory director failed to ensure documentation of initial competencies for 4 out of 5 testing personnel (TP). Findings included: 1. Review of the "Employee Competency Evaluation Policy and Procedure" reveals a lack of requirement for initial competency evaluation for new employees. 2. Review of employee personnel files reveals a lack of initial competency evaluations for 4 out of 5 TP. 3. In an interview on June 2, 2026, at 9:55am in the laboratory office with th technical consultant (TC2), the findings were confirmed.</p>
<b>D6046</b>	<p><b>TECHNICAL CONSULTANT RESPONSIBILITIES</b> CFR(s): 493.1413(b)(8)</p> <p>(b)(8) Evaluating the competency of all testing personnel and assuring that the staff maintain their competency to perform test procedures and report test results promptly,</p>

accurately and proficiently. The procedures for evaluation of the competency of the staff must include, but are not limited to--

This STANDARD is not met as evidenced by:

Based on records review, lack of documentation, and staff interview, TC2 failed to include the six (6) competency assessment procedures found under the technical consultant responsibilities in the performance of competency assessments. Findings include: 1. Review of the employee competency evaluation policy and procedure reveals a lack of utilization of the 6 competency assessment procedures. 2. In an interview on June 2, 2026 at 9:55am in the laboratory office with TC2, the finding was confirmed.