

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 44D0315886	(X3) Date Survey Completed 01/24/2024
Name of Provider or Supplier Columbia Pediatric Clinic	Street Address, City, State 1600 Nashville Hwy, Columbia, TN	
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
D5407	<p>PROCEDURE MANUAL CFR(s): 493.1251(d)</p> <p>Procedures and changes in procedures must be approved, signed, and dated by the current laboratory director before use.</p> <p>This STANDARD is not met as evidenced by: Based on review of the Laboratory Personnel Report (Form CMS-209), the laboratory procedure manual and staff interview, the current laboratory director failed to approve the laboratory procedure manual for 2023. The findings include: 1. Review of the Laboratory Personnel Report (Form CMS-209) revealed the current laboratory director to be different than the laboratory director that signed the procedure manual in 2023. 2. Review of the laboratory procedure manual revealed lack of signatures by the current laboratory director. 3. Interview with the current laboratory director, the technical consultant, office manager and lead testing personnel on 1.24.24 at 12:00 p. m. confirmed that the current laboratory director assumed responsibility for the laboratory in May 2023 and failed to approve the laboratory procedure manual upon taking over directorship.</p>