

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 44D2264561	(X3) Date Survey Completed 01/08/2025
Name of Provider or Supplier Kidsfirst Childrens Urgent Care	Street Address, City, State 329 Wesley St, Johnson City, 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
D5401	<p>PROCEDURE MANUAL CFR(s): 493.1251(a)</p> <p>(a) A written procedures manual for all tests, assays, and examinations performed by the laboratory must be available to, and followed by, laboratory personnel. Textbooks may supplement but not replace the laboratory's written procedures for testing or examining specimens.</p> <p>This STANDARD is not met as evidenced by: Based on observation of the laboratory, review of the laboratory procedure manual, review of calibration verification records, and staff interview, the laboratory failed to follow its written policy for calibration verification frequency in 2023. The findings include: 1. Observation of the laboratory on 01.08.2025 at 9:15 a.m. revealed a Cell-Dyn Emerald hematology analyzer (Serial Number: 10253) used for patient Complete Blood Count (CBC) testing. 2. A review of the laboratory's Complete Blood Count procedure revealed, "Calibration is performed and documented at least every six months and whenever major maintenance is done." 3. A review of laboratory calibration verification records revealed the laboratory failed to perform calibration verification every six months in 2023. 4. An interview with the laboratory lead on 01.08.2025 at 10:45 a.m. confirmed the above survey findings.</p>