

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 45D0505253	<b>(X3) Date Survey Completed</b> 03/11/2025
<b>Name of Provider or Supplier</b> Adc, Pllc, Pediatrics At Cedar Bend, The	<b>Street Address, City, State</b> 2400 Cedar Bend, Austin, TX	
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>	The laboratory was surveyed and found to be in compliance with the Conditions of the CLIA regulations found at 42 CFR 493.1 through 493.1780, and recertification is recommended. Standard level deficiencies were cited.
<b>D5821</b>	<p>TEST REPORT CFR(s): 493.1291(k)</p> <p>(k)When errors in the reported patient test results are detected, the laboratory must do the following: (k)(1) Promptly notify the authorized person ordering the test and, if applicable, the individual using the test results of reporting errors. (k)(2) Issue corrected reports promptly to the authorized person ordering the test and, if applicable, the individual using the test results. (k)(3) Maintain duplicates of the original report, as well as the corrected report.</p> <p>This STANDARD is not met as evidenced by: Review of patient test reports and interview showed the laboratory failed to correctly tabulate the test report to show it was a corrected report in the electronic medical record (EMR) for one of one complete blood count (CBC) corrected reports reviewed. Findings follow. A. Review of patient test reports showed the laboratory issued a CBC test report for patient 8X800617048 on 01/23/2025 when no quality control (QC) had been performed on the Sysmex XP-300. B. Interview with the nursing supervisor on March 11, 2025 at 1300 hours acknowledged the replaced report should have said "corrected" so that staff would know there was a second corrected report. She said she pulled the original report not knowing there was a corrected report because the amended report was not identified as "corrected" when it was put into the EMR.</p>
<b>D6045</b>	<p>TECHNICAL CONSULTANT RESPONSIBILITIES CFR(s): 493.1413(b)(7)</p>

(b)(7) Identifying training needs and assuring that each individual performing tests receives regular in-service training and education appropriate for the type and complexity of the laboratory services performed;

This STANDARD is not met as evidenced by:

Based on review of the laboratory's policies and procedures, documentation of training records, pre-survey paperwork, and interview, the Technical Consultant failed to ensure 4 of 8 new testing personnel had the appropriate documentation of training on the Sysmex XP-300 for the complete blood count (CBC). Findings follow. A. Review of the laboratory's policy and procedure titled General Laboratory Polices (Moderately Complex Lab), approved 03/04/2025, under Laboratory Personnel stated, "Testing personnel must upon hire, supply the laboratory with proof of their highest level of education (minimum High School Diploma or GED). Copies of transcripts or diplomas are acceptable (not nursing licenses, medical assistant certificates, etc.). The laboratory documents the training of testing personnel for all applicable laboratory procedures." B. Review of documentation of training records showed no documentation for the following new testing personnel as listed on the CMS Form 209 with their hire/start dates from the pre-survey paperwork titled "Laboratory Personnel": 1. #2 02/12/2024, 2. #4 09/30/2024, 3. #8 10/2024, and 4. #11 10/21 /2024. C. Interview with the Technical Consultant on March 11, 2025 at 0940 hours confirmed the findings.