

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 45D0507022	(X3) Date Survey Completed 11/17/2021
Name of Provider or Supplier Amarillo Urology Associates	Street Address, City, State 1900 Medi Park, Amarillo, TX	
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
D5217	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1)</p> <p>At least twice annually, the laboratory must verify the accuracy of any test or procedure it performs that is not included in subpart I of this part.</p> <p>This STANDARD is not met as evidenced by: Based on review of laboratory records and staff interview, it was revealed the laboratory failed to have documentation of performing twice annual accuracy assessment for gross analysis of tissue specimens (high complexity) performed by testing personnel. Findings included: 1. A review of the laboratory's records from 2020 and 2021 found the laboratory had no documentation for performing twice annual accuracy assessment of gross analysis of tissue specimens available for review. 2. Interview of the General Supervisor conducted November 17, 2021 at 10:57 AM confirmed that there was no documentation available for review of semi-annual accuracy assessment of gross analysis of tissue specimens.</p>