

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 45D0660099	(X3) Date Survey Completed 09/06/2022
Name of Provider or Supplier Urolithiasis Laboratory, The	Street Address, City, State 9525 Katy Freeway, Suite 222, Houston, 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
D0000	Noted deficiencies and plans of correction were discussed with the laboratory representative(s) at the exit conference. The facility representative(s) were given an opportunity to provide evidence of compliance with the noted deficiencies, and no such evidence was provided prior to survey exit. The facility was found in compliance with applicable Conditions of Participation in the CLIA program, and recertification is recommended. Note: The CMS-2567 (Statement of Deficiencies) is an official, legal document. All information must remain unchanged except for entering the plan of correction, correction dates, and the signature space. Any discrepancy in the original deficiency citation(s) will be reported to the CMS Southern Operations Branch-Dallas for referral to the Office of Inspector General (OIG) for possible fraud. If information is inadvertently changed by the provider/supplier, the State Survey Agency (SA) should be notified immediately.
D6124	<p>TECHNICAL SUPERVISOR RESPONSIBILITIES CFR(s): 493.1451(b)(8)(iv)</p> <p>The procedures for evaluation of the competency of the staff must include, but are not limited to direct observation of performance of instrument maintenance and function checks.</p> <p>This STANDARD is not met as evidenced by: Based on review of the laboratory's submitted Form 116, review of laboratory's testing personnel competency assessments for 2021 and 2022 and staff interview, it was determined the laboratory failed to document competency evaluation for instrument maintenance and function checks, 1 of 6 required components of competency assessment. Findings included: 1. Review of the laboratory's submitted Form 116 revealed there were 2 testing personnel employed by the laboratory. 2. Review of laboratory's testing personnel competency assessments for 2021 and 2022 revealed there was no documentation of competency evaluation for instrument maintenance and function checks, 1 of 6 required components of competency assessment. 3. In an</p>

interview on 09/06/2022 at 0955 hours in the office, the laboratory's Technical Supervisor number 2, after review of the data, confirmed the findings.

D6126

TECHNICAL SUPERVISOR RESPONSIBILITIES

CFR(s): 493.1451(b)(8)(vi)

The procedures for evaluation of the competency of the staff must include, but are not limited to assessment of problem solving skills.

This STANDARD is not met as evidenced by:

Based on review of the laboratory's submitted Form 116, review of laboratory's testing personnel competency assessments for 2021 and 2022 and staff interview, it was determined the laboratory's Technical Supervisor failed to document competency evaluation of problem solving skills for 1 of 2 testing personnel. Findings included: 1. Review of the laboratory's submitted Form 116 revealed there were 2 testing personnel employed by the laboratory. 2. Review of laboratory's testing personnel competency assessments for 2021 and 2022 revealed Testing Person number 1 did not have competency evaluation of problem solving skills included in the competency assessments for either 2021 or 2022. 3. In an interview on 09/06/2022 at 1005 hours in the office, the laboratory's Technical Supervisor number 2, after review of the data, confirmed the findings.