

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 45D0926410	(X3) Date Survey Completed 09/10/2020
Name of Provider or Supplier North Houston Medicine, Tumor & Blood Clinic, Pa	Street Address, City, State 1631 North Loop West, #100, 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
D2123	<p>HEMATOLOGY CFR(s): 493.851(c)</p> <p>Failure to participate in a testing event is unsatisfactory performance and results in a score of 0 for the testing event. Consideration may be given to those laboratories failing to participate in a testing event only if-- (1) Patient testing was suspended during the time frame allotted for testing and reporting proficiency testing results; (2) The laboratory notifies the inspecting agency and the proficiency testing program within the time frame for submitting proficiency testing results of the suspension of patient testing and the circumstances associated with failure to perform tests on proficiency testing samples; and (3) The laboratory participated in the previous two proficiency testing events.</p> <p>This STANDARD is not met as evidenced by: No deficiency details available.</p>
D5209	<p>PERSONNEL COMPETENCY ASSESSMENT POLICIES CFR(s): 493.1235</p> <p>As specified in the personnel requirements in subpart M, the laboratory must establish and follow written policies and procedures to assess employee and, if applicable, consultant competency.</p> <p>This STANDARD is not met as evidenced by: No deficiency details available.</p>