

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 45D1038621	(X3) Date Survey Completed 06/12/2018
Name of Provider or Supplier Coppell Fire Dept	Street Address, City, State 265 East Parkway Blvd, Coppell, 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	<p>06/11/2018 - 06/12/2018 Based on an unannounced revisit survey conducted on June 11, 2018 and June 12, 2018, the laboratory is not in compliance with the following Conditions of Participation required for certification in the CLIA program at 42 CFR part 493. Specifically, the following Conditions we're not met: D5400 - 42 C.F.R. 493.1250 Condition: Analytic systems; D6000 - 42 C.F.R. 493.1403 Condition: Laboratories performing moderate complexity testing; laboratory director; D6033 - 42 C.F.R. 493.1409 Condition: Laboratories performing moderate complexity testing; technical consultant; D6063 - 42 C.F.R. 493.1421 Condition: Laboratories performing moderate complexity testing; testing personnel; The laboratory resumed patient testing in February 2018. ***** 11/28/2017</p> <p>Based on an unannounced revisit survey conducted on November 28, 2017, the laboratory is not in compliance with the following Conditions of Participation required for certification in the CLIA program at 42 CFR part 493. Specifically, the following Conditions we're not met: D5400 - 42 C.F.R. 493.1250 Condition: Analytic systems; D6000 - 42 C.F.R. 493.1403 Condition: Laboratories performing moderate complexity testing; laboratory director; D6033 - 42 C.F.R. 493.1409 Condition: Laboratories performing moderate complexity testing; technical consultant; D6063 - 42 C.F.R. 493.1421 Condition: Laboratories performing moderate complexity testing; testing personnel; The current laboratory director is also the technical consultant and had not been on-site 2 days per week until compliance was met as required by the CMS Regional Office Directed Plan of Correction.</p> <p>***** Based on an unannounced revisit survey conducted May 25, 2017, the facility was still found NOT to be in compliance with the CLIA regulations found at 42 CFR 493.1250 Analytic Systems, 493.1403 Laboratory Director, (moderate complexity, and 493.1409 Technical Consultant. In addition the facility failed to follow CMS Regional Office Directed Plan of Correction - hiring a qualified Technical Consultant who was to be onsite 2 days a week until compliance was met and then once a month. Survey findings were discussed with the Division Chief.</p> <hr/> <p>The Division Chief and Paramedic #1 were at the entrance conference conducted 06</p>

/15/2016. The survey process was discussed. An opportunity for questions and comments given. Based on the onsite survey conducted on 06/15/2016, this facility was found NOT to be in compliance with the CLIA regulations found at 42 CFR 493.1250 Analytic Systems, 493.1403 Laboratory Director, (moderate complexity, and 493.1409 Technical Consultant. An exit conference was held with the Division Chief and Paramedic #1 on 06/15/2016. The 23 day termination process was explained.