

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 45D2049777	(X3) Date Survey Completed 10/06/2026
Name of Provider or Supplier Complete Emergency Care I, Llc	Street Address, City, State 10628 Culebra Road #200, San Antonio, 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
D5813	TEST REPORT CFR(s): 493.1291(g) (g) The laboratory must immediately alert the individual or entity requesting the test and, if applicable, the individual responsible for using the test results when any test result indicates an imminently life-threatening condition, or panic or alert values. This STANDARD is not met as evidenced by: Based on review of the laboratory's policies, review of patient test records from August 2026, review of the laboratory's critical values log from 2025 and 2026, and staff interview, the laboratory failed to have documentation of the notification of 3 of 3 critical values. The findings included: 1. The laboratory's policy titled "Review and Release of Patient Results Verification" (approved 7/16/2019) under the section titled "Documentation" stated: "All critical values, notified personnel, date and time of notification and tech initials are documented on the Critical Value Log..." 2. The laboratory's chart titled "Hematology Reference Range Values" defined the laboratory's critical values requiring notification as: White blood cell less than 3 greater than 20 Hemoglobin less than 6 greater than 20 Hematocrit less than 18 greater than 60 Platelet less than 90 greater than 1000 3. A random sampling of patient test records from August 2026 identified 3 patient results with critical values: a) Date: August 2, 2026 Sample ID: 080201 White blood cell value: 21.1 b) Date: August 24, 2026 Sample ID: 082411 White blood cell value: 29.8 c) Date: August 24, 2026 Sample ID: 082409 White blood cell value: 2.7 4. A review of the laboratory's Critical Value Log from November 29, 2025 to September 16, 2026 determined the laboratory did not have documentation of the 3 identified critical values as stated in its policy. 5. The technical consultant confirmed the findings in an interview conducted on 10/06/2026 at 1115 hours in the laboratory.