

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  46D2082338	<b>(X3) Date Survey Completed</b>  08/26/2021
<b>Name of Provider or Supplier</b>  Lifespring Pain Management Center	<b>Street Address, City, State</b>  275 W 200 N #7, Kaysville, UT	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D5413</b>	<p>TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(b)</p> <p>The laboratory must define criteria for those conditions that are essential for proper storage of reagents and specimens, accurate and reliable test system operation, and test result reporting. The criteria must be consistent with the manufacturer's instructions, if provided. These conditions must be monitored and documented and, if applicable, include the following: (1) Water quality. (2) Temperature. (3) Humidity. (4) Protection of equipment and instruments from fluctuations and interruptions in electrical current that adversely affect patient test results and test reports.</p> <p>This STANDARD is not met as evidenced by: Based on direct observation, record review, and interview with Technical Consultant, proper storage conditions for reagents and specimens were not maintained. Findings include: 1. Sample refrigerator thermometer calibration expired 7/15/2018 according to manufacturer. 2. Reagent refrigerator thermometer calibration expired 7/16/2018 according to manufacturer. 3. Room temperature and humidity monitor calibration expired 10/27/2018 according to manufacturer. 4. In an interview on 8/26/21 at approximately 12:30 pm, the Technical Consultant confirmed that the thermometers were past due for calibration or replacement.</p>