

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 49D0666189	(X3) Date Survey Completed 10/20/2020
Name of Provider or Supplier Walk In Care - Forest	Street Address, City, State 1175 Corporate Park Dr, Forest, VA	
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	An announced on-site CLIA recertification survey was conducted at Walk In Care-Forest on October 20, 2020 by the Virginia Department of Health's Office of Licensure and Certification. The survey included an entrance interview on 10/05/2020 and virtual record review conducted on 10/14/2020. The laboratory was surveyed under 42 CFR part 493 CLIA Regulations. Specific deficiency cited as follows:
D5805	<p>TEST REPORT CFR(s): 493.1291(c)</p> <p>The test report must indicate the following: (c)(1) For positive patient identification, either the patient's name and identification number, or a unique patient identifier and identification number. (c)(2) The name and address of the laboratory location where the test was performed. (c)(3) The test report date. (c)(4) The test performed. (c)(5) Specimen source, when appropriate. (c)(6) The test result and, if applicable, the units of measurement or interpretation, or both. (c)(7) Any information regarding the condition and disposition of specimens that do not meet the laboratory's criteria for acceptability.</p> <p>This STANDARD is not met as evidenced by: Based on a review of the laboratory's Centers for Medicare and Medicaid Services (CMS) 116 form, patient test logs, four (4) randomly selected patient reports, and an interview, the laboratory's complete blood count (CBC) test report failed to include the correct performing laboratory name and address during the timeframe of July 25, 2019 to the date of the record review on October 14, 2020. Findings include: 1. Review of the laboratory's CMS 116 form revealed a laboratory name and physical facility location as follows: Walk In Care-Forest 1175 Corporate Park Drive Forest, Virginia 24551 2. The inspector requested to review the following CBC results from the patient test logs: medical record number (MR #) 9758764 from 7/25/19, MR # 9584942 from 11/ 5/19, MR # 9742888 from 1/14/20, and MR # 9754861 from 10/14 /20. The inspector's review noted that the 4 randomly selected patient CBC reports</p>

revealed performing laboratory name and testing location as: Blue Ridge Immediate Care 2137 Lakeside Drive Lynchburg, Virginia 24501 The primary testing personnel stated at, approximately 11 AM, that the facility had been re-branded in July of 2019 and that they failed to note and enter the updated name and address on the CBC printed report. 3. In an interview with the Clinical Laboratory Resource Specialist on 10/14/20 at approximately 11:30 AM, the above findings were confirmed.