

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 49D1053182	<b>(X3) Date Survey Completed</b> 10/09/2024
<b>Name of Provider or Supplier</b> Vascular Access Services (Va Beach Endovascular)	<b>Street Address, City, State</b> 397 Little Neck Road, Virginia Beach, VA	
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>D0000</b>	An announced CLIA recertification survey was conducted at Vascular Access Services (Virginia Beach Endovascular) on October 9, 2024 by the Virginia Department of Health's Office of Licensure and Certification.. The laboratory was surveyed under 42 CFR part 493 CLIA Regulations. Specific deficiency cited is as follows:
<b>D5429</b>	<p><b>MAINTENANCE AND FUNCTION CHECKS</b> CFR(s): 493.1254(a)(1)</p> <p>For unmodified manufacturer's equipment, instruments, or test systems, the laboratory must perform and document maintenance as defined by the manufacturer and with at least the frequency specified by the manufacturer.</p> <p>This STANDARD is not met as evidenced by: Based on a review of procedures, analyzer maintenance records, lack of documentation, and an interview, the laboratory failed to document performance of three of four required maintenance checks every six (6) months during the twenty-two (22) months of review (review timeframe: January 2023 - October 9, 2024). Findings include: 1. Review of the laboratory manual revealed procedures for non-waived Chemistry 8 (Sodium, Potassium, Chloride, Glucose, Urea Nitrogen, Calcium), Hematology Prothrombin Time with International Normalized Ratio, and Activated Clotting Time (ACT) utilizing the Abbott iSTAT analyzer. The iSTAT manufacturer's procedures outlined instructions to "perform iSTAT Thermal Probe Check every 6 months." 2. Review of the laboratory's iSTAT Thermal Probe maintenance logs from January 2023 to the date of the inspection on 10/09/24 revealed that documentation of the every 6 month maintenance checks outlined above was performed once in the 22 months reviewed (performed 1/10/23). The inspector requested to review additional thermal probe maintenance documentation. No additional records were available. 3. An exit interview with the laboratory's nurse clinical coordinator on 10/09/24 at 12:30 PM confirmed the above findings.</p>