Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number** 49D1080580	**(X3) Date Survey Completed** 10/06/2020
Name of Provider or Supplier Northern Virginia Hematology Oncology Associates	**Street Address, City, State** 2079 Daniel Stuart Square, Woodbridge, 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 unannounced off-site proficiency testing desk review of Northern Virginia Hematology Oncology Associates, PC was conducted on October 6, 2020 by the Virginia Department of Health's Office of Licensure and Certification. The laboratory was inspected under 42 CFR Part 493 CLIA regulations. Specific deficiencies cited are as follows:
D2016	SUCCESSFUL PARTICIPATION CFR(s): 493.803(a)(b)(c) (a) Each laboratory performing nonwaived testing must successfully participate in a proficiency testing program approved by CMS, if applicable, as described in subpart I of this part for each specialty, subspecialty, and analyte or test in which the laboratory is certified under CLIA. (b) Except as specified in paragraph (c) of this section, if a laboratory fails to participate successfully in proficiency testing for a given specialty, subspecialty, analyte or test, as defined in this section, or fails to take remedial action when an individual fails gynecologic cytology, CMS imposes sanctions, as specified in subpart R of this part. (c) If a laboratory fails to perform successfully in a CMS-approved proficiency testing program, for the initial unsuccessful performance, CMS may direct the laboratory to undertake training of its personnel or to obtain technical assistance, or both, rather than imposing alternative or principle sanctions except when one or more of the following conditions exists: (1) There is immediate jeopardy to patient health and safety. (2) The laboratory fails to provide CMS or a CMS agent with satisfactory evidence that it has taken steps to correct the problem identified by the unsuccessful proficiency testing performance. (3) The laboratory has a poor compliance history. This CONDITION is not met as evidenced by: Based on an off-site desk review of the laboratory's American Proficiency Institute proficiency testing (PT) records and interview, the laboratory failed to attain a score of at least eighty percent of acceptable responses for Total Bilirubin in two

	consecutive Chemistry testing events resulting in unsuccessful PT performance (reviewed: 2020 Second Event, 2020 Third Event). See D2097.
D2097	ROUTINE CHEMISTRY CFR(s): 493.841(g) Failure to achieve an overall testing event score of satisfactory performance for two consecutive testing events or two out of three consecutive testing events is unsuccessful performance. This STANDARD is not met as evidenced by: Based on an off-site desk review of the laboratory's American Proficiency Institute (API) proficiency testing (PT) results and interview, the laboratory failed to attain a score of at least eighty percent (80%) of acceptable analyte responses for Total Bilirubin (TBil) on two (2) consecutive chemistry testing events reviewed (2020 Second Event and 2020 Third Event). Findings include: 1. Review of the laboratory's API Chemistry Core PT module results revealed a TBil analyte score of less than 80% for the following consecutive events: API Chemistry Core 2020 Event 2 TBil = 0%; API Chemistry Core 2020 Event 3 TBil = 40%; resulting in an unsuccessful TBil PT performance. 2. In a telephone interview with the primary testing personnel on October 6, 2020 at approximately 12:00 PM, the above findings were confirmed.