Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	51D0669427	03/20/2018
Name of Provider or Supplier	**Street Address, City, State**	
Muhammed I Khokar Md	608 New Hope Road Suite 3, Princeton, WV	

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
D5305	TEST REQUEST CFR(s): 493.1241(c) The laboratory must ensure the test requisition solicits the following information: (1) The name and address or other suitable identifiers of the authorized person requesting the test and, if appropriate, the individual responsible for using the test results, or the name and address of the laboratory submitting the specimen, including, as applicable, a contact person to enable the reporting of imminently life threatening laboratory results or panic or alert values. (2) The patient's name or unique patient identifier. (3) The sex and age or date of birth of the patient. (4) The test(s) to be performed. (5) The source of the specimen, when appropriate. (6) The date and, if appropriate, time of specimen collection. (7) For Pap smears, the patient's last menstrual period, and indication of whether the patient had a previous abnormal report, treatment, or biopsy. (8) Any additional information relevant and necessary for a specific test to ensure accurate and timely testing and reporting of results, including interpretation, if applicable. This STANDARD is not met as evidenced by: Based on review of the laboratory's patient test requisition and interview with Testing Personnel #1 (TP1), the laboratory failed to ensure that the test requisition solicited the date and time of collection for 4 of 4 patient test records reviewed. Record review was from 2/19/18 to 3/1/18. The findings include: 1. Review of the laboratory's patient test requisitions identified a lack of date and time of collection for 4 of 4 test requisitions. 2. On 3/20/18 at approximately 1:00 PM, TP1 confirmed the findings.
D5787	TEST RECORDS CFR(s): 493.1283(a) The laboratory must maintain an information or record system that includes the following: (a)(1) The positive identification of the specimen. (a)(2) The date and time

	of specimen receipt into the laboratory. (a)(3) The condition and disposition of specimens that do not meet the laboratory's criteria for specimen acceptability. (a)(4) The records and dates of all specimen testing, including the identity of the personnel who performed the test(s). This STANDARD is not met as evidenced by: Based on review of the laboratory's policy and procedure manual, Coulter AcT Diff analyzer's patient test printouts and interview with Testing Personnel #1 (TP1), the laboratory did not maintain a record system that included the identity of the personnel who performed the Complete Blood Cell (CBC) counts on the Coulter AcT diff Analyzer for 4 of 4 patient test printouts reviewed. Record review was from 2/19/18 to 3/1/18. The findings include: 1. Review of the laboratory's policy and procedure manual identified a procedure, "Hematology Standard Operating Procedure", which stated "Reporting Results: All results are reviewed and initialed prior to reporting on the chart." 2. Review of 4 of 4 AcT Diff Analyzer instrument printouts for 2/19/18 to 3/1/18 revealed the laboratory was not identifying the testing personnel who performed the CBC counts on the AcT Diff hematology analyzer. 3. On 3/20/18 at approximately 1:00 PM, TP1 confirmed the findings.