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| Statement of Deficiencies | (X1) Provider/Supplier/CLIA Identification Number 03D0951216 | (X3) Date Survey Completed 01/25/2024 |
| Name of Provider or Supplier Specialists In Dermatology Pllc | Street Address, City, State 2732 N Alvernon Way, Tucson, AZ | |
| 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 |
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| D5403 | <p>PROCEDURE MANUAL CFR(s): 493.1251(b)</p> <p>The procedure manual must include the following when applicable to the test procedure: (1) Requirements for patient preparation; specimen collection, labeling, storage, preservation, transportation, processing, and referral; and criteria for specimen acceptability and rejection as described in 493.1242. (2) Microscopic examination, including the detection of inadequately prepared slides. (3) Step-by-step performance of the procedure, including test calculations and interpretation of results. (4) Preparation of slides, solutions, calibrators, controls, reagents, stains, and other materials used in testing. (5) Calibration and calibration verification procedures. (6) The reportable range for test results for the test system as established or verified in 493.1253. (7) Control procedures. (8) Corrective action to take when calibration or control results fail to meet the laboratory's criteria for acceptability. (9) Limitations in the test methodology, including interfering substances. (10) Reference intervals (normal values). (11) Imminently life-threatening test results, or panic or alert values. (12) Pertinent literature references. (13) The laboratory's system for entering results in the patient record and reporting patient results including, when appropriate, the protocol for reporting imminently life threatening results, or panic, or alert values. (14) Description of the course of action to take if a test system becomes inoperable.</p> <p>This STANDARD is not met as evidenced by: Based on review of the laboratory's test procedures for testing performed under the subspecialty of Histopathology and interview with the facility personnel, the test procedures failed to include the laboratory's system for entering results in the patient record and reporting patient results. Findings include: 1. The laboratory renders a diagnosis based on the microscopic interpretation of patient slides under the subspecialty of Histopathology. It is the practice of the laboratory to enter the final test results into the patient's Electronic Health Record (EHR). 2. The Mohs test procedure, Biopsy test procedure, Frozen Excision test procedure and Frozen Biopsy</p> |

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| | <p>test procedure reviewed during the survey failed to include the laboratory's system for entering and reporting test results in the patients' EHR. 3. Interview with the facility personnel on 01/25/2024 at 1:35 PM confirmed the test procedures listed above lacked information regarding the laboratory's system for entering and reporting patient test results in the EHR. 4. The laboratory's reported annual test volume for Histopathology is 23,966.</p> |
| <p>D6102</p> | <p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(12)</p> <p>The laboratory director must ensure that prior to testing patients' specimens, all personnel have the appropriate education and experience, receive the appropriate training for the type and complexity of the services offered, and have demonstrated that they can perform all testing operations reliably to provide and report accurate results.</p> <p>This STANDARD is not met as evidenced by: Based on review of academic credential documentation for three out of three testing personnel (TP) and interview with the facility personnel, the laboratory director failed to ensure that all testing personnel have the appropriate education and experience prior to testing patients' specimens. Findings include: 1. The laboratory failed to produce evidence of academic credentials for three out of three testing personnel listed on the CMS-209, Laboratory Personnel form presented for review during the survey, to indicate the three testing personnel have the appropriate education to perform high complexity testing in the subspecialty of Histopathology. 2. The facility personnel interviewed on 01/25/2024 at 1:10 PM confirmed the laboratory director failed to ensure the testing personnel indicated above had the appropriate education and experience prior to testing patients' specimens.</p> |
| <p>D6168</p> | <p>TESTING PERSONNEL CFR(s): 493.1487</p> <p>The laboratory has a sufficient number of individuals who meet the qualification requirements of 493.1489 of this subpart to perform the functions specified in 493.1495 of this subpart for the volume and complexity of testing performed.</p> <p>This CONDITION is not met as evidenced by: Based on review of personnel records and interview with the facility personnel, the laboratory failed to have academic credentials required to qualify three of three testing personnel who perform the gross description of patient specimens under the subspeciality of Histopathology (Refer to D6171).</p> |
| <p>D6171</p> | <p>TESTING PERSONNEL QUALIFICATIONS CFR(s): 493.1489(b)</p> <p>(b) Meet one of the following requirements: (b)(1) Be a doctor of medicine, doctor of osteopathy, or doctor of podiatric medicine licensed to practice medicine, osteopathy, or podiatry in the State in which the laboratory is located or have earned a doctoral, master's or bachelor's degree in a chemical, physical, biological or clinical laboratory science, or medical technology from an accredited institution; (b)(2)(i) Have earned an associate degree in a laboratory science, or medical laboratory technology from an</p> |

accredited institution or-- (b)(2)(ii) Have education and training equivalent to that specified in paragraph (b)(2)(i) of this section that includes-- (b)(2)(ii)(A) At least 60 semester hours, or equivalent, from an accredited institution that, at a minimum, include either-- (b)(2)(ii)(A)(1) 24 semester hours of medical laboratory technology courses; or (b)(2)(ii)(A)(2) 24 semester hours of science courses that include-- (b)(2)(ii)(A)(2)(i) Six semester hours of chemistry; (b)(2)(ii)(A)(2)(ii) Six semester hours of biology; and (b)(2)(ii)(A)(2)(iii) Twelve semester hours of chemistry, biology, or medical laboratory technology in any combination; and (b)(2)(ii)(B) Have laboratory training that includes either of the following: (b)(2)(ii)(B)(1) Completion of a clinical laboratory training program approved or accredited by the ABHES, the CAHEA, or other organization approved by HHS. (This training may be included in the 60 semester hours listed in paragraph (b)(2)(ii)(A) of this section.) (b)(2)(ii)(B)(2) At least 3 months documented laboratory training in each specialty in which the individual performs high complexity testing. (b)(3) Have previously qualified or could have qualified as a technologist under 493.1491 on or before February 28, 1992; (b)(4) On or before April 24, 1995 be a high school graduate or equivalent and have either-- (b)(4)(i) Graduated from a medical laboratory or clinical laboratory training program approved or accredited by ABHES, CAHEA, or other organization approved by HHS; or (b)(4)(ii) Successfully completed an official U.S. military medical laboratory procedures training course of at least 50 weeks duration and have held the military enlisted occupational specialty of Medical Laboratory Specialist (Laboratory Technician); (b)(5)(i) Until September 1, 1997-- (b)(5)(i)(A) Have earned a high school diploma or equivalent; and (b)(5)(i)(B) Have documentation of training appropriate for the testing performed before analyzing patient specimens. Such training must ensure that the individual has-- (b)(5)(i)(B)(1) The skills required for proper specimen collection, including patient preparation, if applicable, labeling, handling, preservation or fixation, processing or preparation, transportation and storage of specimens; (b)(5)(i)(B)(2) The skills required for implementing all standard laboratory procedures; (b)(5)(i)(B)(3) The skills required for performing each test method and for proper instrument use; (b)(5)(i)(B)(4) The skills required for performing preventive maintenance, troubleshooting, and calibration procedures related to each test performed; (b)(5)(i)(B)(5) A working knowledge of reagent stability and storage; (b)(5)(i)(B)(6) The skills required to implement the quality control policies and procedures of the laboratory; (b)(5)(i)(B)(7) An awareness of the factors that influence test results; and (b)(5)(i)(B)(8) The skills required to assess and verify the validity of patient test results through the evaluation of quality control values before reporting patient test results; and (b)(5)(i)(B)(8)(ii) As of September 1, 1997, be qualified under 493.1489(b)(1), (b)(2), or (b)(4), except for those individuals qualified under paragraph (b)(5)(i) of this section who were performing high complexity testing on or before April 24, 1995; (b)(6) For blood gas analysis-- (b)(6)(i) Be qualified under 493.1489(b)(1), (b)(2), (b)(3), (b)(4), or (b)(5); (b)(6)(ii) Have earned a bachelor's degree in respiratory therapy or cardiovascular technology from an accredited institution; or (b)(6)(iii) Have earned an associate degree related to pulmonary function from an accredited institution; or (b)(7) For histopathology, meet the qualifications of 493.1449 (b) or (l) to perform tissue examinations.

This STANDARD is not met as evidenced by:

Based on academic documentation presented for review for three out of three testing personnel who perform the gross examination on patient specimens and interview with the facility personnel, three out of three testing personnel failed to meet the required education qualifications to perform high complexity testing. Findings include: 1. The laboratory performs grossing and biopsy interpretations under the

subspecialty of Histopathology, with a reported annual test volume of 23,966. 2. The CMS-209, Laboratory Personnel form submitted for review during the survey listed three testing personnel who perform the gross examination on patient specimens. 3. No evidence of acceptable academic credentials were presented for review during the survey to indicate three out of three testing personnel met the required education qualifications under 493.1489 in the CLIA regulations for Testing Personnel who perform high complexity testing. 4. The facility personnel interviewed on 01/25/2024 at 1:00 PM confirmed that the testing personnel stated above lacked the appropriate education documentation for the complexity of testing performed by the laboratory.