

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  03D2066117	<b>(X3) Date Survey Completed</b>  05/04/2018
<b>Name of Provider or Supplier</b>  Bingham Dermatology Group	<b>Street Address, City, State</b>  2855 E Brown Rd Ste 28, Mesa, AZ	
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>D5217</b>	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1)</p> <p>At least twice annually, the laboratory must verify the accuracy of any test or procedure it performs that is not included in subpart I of this part.</p> <p>This STANDARD is not met as evidenced by: Based on lack of documentation presented for review and interview with the facility personnel, the laboratory failed to verify the accuracy of Mohs surgery slide reading at least twice annually during 2016 and 2017. Findings include*: 1. The laboratory performs patient testing under the sub-specialty of Histopathology with an annual test volume of 780. 2. The laboratory presented accuracy checks performed by an outside lab in 2018 for Dermatopathology diagnostic assessment of Mohs slides from 2016 and 2017. There was no accuracy checks pertaining specifically to Mohs including number of stages and margins clear on a specific stage. There was only the pathology diagnostic assessment. 3. The slides from 2016 and 2017 were not sent out for accuracy assessment until 2018. 4. The facility personnel acknowledged that there was a misunderstanding pertaining to the accuracy checks. * This is a repeat deficiency from the survey performed on 03/24/2016.</p>
<b>D5413</b>	<p>TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(b)</p> <p>The laboratory must define criteria for those conditions that are essential for proper storage of reagents and specimens, accurate and reliable test system operation, and test result reporting. The criteria must be consistent with the manufacturer's instructions, if provided. These conditions must be monitored and documented and, if applicable, include the following: (1) Water quality. (2) Temperature. (3) Humidity. (4) Protection of equipment and instruments from fluctuations and interruptions in electrical current that adversely affect patient test results and test reports.</p>

This STANDARD is not met as evidenced by:

Based on lack of room temperature logs for review and interview with the facility personnel, the laboratory failed to document the temperature of the room where slide staining reagents are stored for testing under the sub-specialty of Histopathology . Findings include\*: 1. The laboratory presented a policy that indicated the criteria for the room temperature where slide staining reagents are stored (72 - 82 degrees F), but the room temperature log presented for review had no room temperatures documented. 2. The facility personnel confirmed that the laboratory was not documenting the room temperature as indicated above. \* This is a repeat deficiency from the survey performed on 03/24/2016.