

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 04D2132375	(X3) Date Survey Completed 04/22/2024
Name of Provider or Supplier Franks Dermatology	Street Address, City, State 4220 North Rodney Parham #320, Little Rock, AR	
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
D5891	<p>POSTANALYTIC SYSTEMS QUALITY ASSESSMENT CFR(s): 493.1299(a)</p> <p>The laboratory must establish and follow written policies and procedures for an ongoing mechanism to monitor, assess and, when indicated, correct problems identified in the postanalytic systems specified in 493.1291.</p> <p>This STANDARD is not met as evidenced by: Based on the lack of documentation and an interview with laboratory staff the laboratory failed to follow established written policies and procedures for an ongoing mechanism to monitor, assess and correct problems identified in the postanalytic systems. Findings include: A. The "Quality Control Assessment" policy included: "The Laboratory Director reviews all quality control charts and logs on at least a monthly basis." B. The "Temperature Monitor Log - Refrigerator, Freezer, Cryostat" and the "Reagent Changes" log were not reviewed by the Laboratory Director for 3 of 3 months (January 2024, February 2024, and March 2024) examined. C. These findings were confirmed by Employee #1 (as noted on the entrance and exit Conference Attendance Sheet) during an interview at 10:07am on 4/22/24.</p>