

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 05D0544604	<b>(X3) Date Survey Completed</b> 06/10/2025
<b>Name of Provider or Supplier</b> Brian E Dubow, Md	<b>Street Address, City, State</b> 435 N Roxbury Dr Ste 204, Beverly Hills, CA	
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>D5821</b>	<p>TEST REPORT CFR(s): 493.1291(k)</p> <p>(k)When errors in the reported patient test results are detected, the laboratory must do the following: (k)(1) Promptly notify the authorized person ordering the test and, if applicable, the individual using the test results of reporting errors. (k)(2) Issue corrected reports promptly to the authorized person ordering the test and, if applicable, the individual using the test results. (k)(3) Maintain duplicates of the original report, as well as the corrected report.</p> <p>This STANDARD is not met as evidenced by: Based on the surveyor's review of the laboratory's quality assessment policy /procedure, five (5) Dermatopathology patient records, and an interview with the medical assistant (MA), it was determined that the laboratory failed to correctly document patient information upon its occurrence. The findings include: 1. The surveyor reviewed 5 Dermatopathology patients. One out of 5 was misspelled on the Moh's map card that affected other records such as patient log and slides. 2. The laboratory practice was to use patient's name and date of service only as major identifiers. Patient number 5 with initials IJ, serviced on 2/19/2025 was affected by the misspelled name as mentioned in statement#1. No corrective action was available for review at the time of survey. 3. The MA affirmed by interview on June 10, 2025, at approximately 10:40 a.m., that discrepancies occurred were missed during quality assessment check. The accuracy and reliability of patient tests reported cannot be assured at this time. 4. According to the laboratory's testing declaration form submitted at the time of the survey, the laboratory performed and reported approximately 1,000 Dermatopathology tests, including the time when the discrepancies in the records occurred.</p>
<b>D6098</b>	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(8)</p>

(e)(8) Ensure that reports of test results include pertinent information required for interpretation;

This STANDARD is not met as evidenced by:

Based on the interview with the medical assistant, review of laboratory's policy /procedure, and 5 Dermatopathology patient test reports, it was determined that the laboratory director failed to ensure that the test reported included the correct pertinent information required for interpretation. See D5821.