

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  05D0971208	<b>(X3) Date Survey Completed</b>  03/03/2025
<b>Name of Provider or Supplier</b>  West Hills Dermatology Group	<b>Street Address, City, State</b>  7230 Medical Center Dr Ste 404, West 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 and documentation, five (5) Mycology patient records and interview with the office manager (OM), it was determined that the laboratory failed to correct errors upon its occurrence. The findings include: 1. Based on the surveyor's review of the quality assessment policy, procedure, and documentation, it was determined that the laboratory was performing daily checks but was limited solely to Dermatopathology records. 2. Based on the surveyor's review of 5 patient records for potassium hydroxide (KOH) tests in Mycology, covering the period from September 12, 2022, to June 21, 2024, one out of 5 was found to have discrepancies in records and reports. Specifically, for Patient RM, who was examined on March 8, 2023, the patient log book indicated a negative result, while the final report in the patient's chart recorded a positive result. 3. On February 26, 2025, at approximately 11:50 a.m., the OM affirmed by interview that the discrepancy noted in statement #2 were neither recognized when they occurred nor detected during the daily quality assessment checks. At the time of the survey, there were no records of corrective actions available for review. 4. According to the laboratory's testing declaration form submitted at the time of the survey, the laboratory performed and reported 65 patient tests for Mycology, including the time when the discrepancy in the reports occurred. Thus, the accuracy of patient results cannot be assured.</p>