Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number** 05D1029810	**(X3) Date Survey Completed** 10/08/2021
Name of Provider or Supplier J Robert West Md, Inc Dba Hodge Dermatology	**Street Address, City, State** 1440 N Harbor Blvd, Ste 300, Fullerton, CA	
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**
D5211	EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(a) The laboratory must review and evaluate the results obtained on proficiency testing performed as specified in subpart H of this part. This STANDARD is not met as evidenced by: Based on the surveyor's review of the laboratory's records for evaluation of proficiency testing performance and an interview with laboratory personnel (LP) on 10 /8/2021 between 11 am and 12:30 pm, it was determined that the laboratory failed to at least twice annually, document their quality assurance/proficiency peer review testing for the year 2020. Findings include: 1. On 10/8/2021, an inspection was conducted between 11 am and 12:30 pm. 2. During a review of the laboratory quality documentation, it was noted at approximately 11:45 am. that the laboratory failed to document MD peer proficiency testing for MOHS/ Histopathology in 2020. 3. The LP recognized that this documentation was missing. 4. MD peer review documentation was present for 2021.