

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  05D2072630	<b>(X3) Date Survey Completed</b>  11/14/2018
<b>Name of Provider or Supplier</b>  Pure Dermatology And Skin Surgery Center	<b>Street Address, City, State</b>  2001 Santa Monica Blvd Ste 480-W, Santa Monica, 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>D5219</b>	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(2)</p> <p>At least twice annually, the laboratory must verify the accuracy of any test or procedure listed in subpart I of this part for which compatible proficiency testing samples are not offered by a CMS-approved proficiency testing program.</p> <p>This STANDARD is not met as evidenced by: Based on the lack of documentation and an interview with an office assistant (November 14, 2018, 9:30 A.M.), the laboratory failed to annually verify the accuracy of their Moh's procedure. Findings include: a. The laboratory did not have documentation that they had verified the accuracy of their Moh's procedure for the years 2017 and 2018. b. An office assistant confirmed that they had not verified the accuracy of their Moh's procedure for 2017 and 2018. c. The laboratory reportedly performs approximately 40 Moh's procedure per year, even though they had not verified the accuracy of this test for 2017 and 2018.</p>