

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 05D2303107	(X3) Date Survey Completed 07/31/2025
Name of Provider or Supplier Irvine Dermatology	Street Address, City, State 6865 Alton Pkwy Ste 210, Irvine, 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
D5217	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1)</p> <p>At least twice annually, the laboratory must verify the accuracy of any test or procedure it performs that is not included in subpart I of this part.</p> <p>This STANDARD is not met as evidenced by: Based on the surveyor's review of Proficiency Testing (PT) records and an interview with the Laboratory Director (LD) on July 31, 2025, it was determined that the Laboratory did not verify the accuracy of the Histopathology test at least twice annually for the years 2024 and 2025. The findings include: 1. It was the practice of the laboratory to perform Mohs Micrographic Surgery, which is not listed in subpart I of the 42 CFR part 493. For test procedures not listed in subpart I, the laboratory must verify the accuracy of the test procedure twice annually. 2. On 07/31/2025 at approximately 10:30 am, the LD confirmed that the laboratory did not verify the accuracy of the Histopathology testing in 2024 and 2025. 3. The laboratory's testing declaration form, signed by the laboratory director on July 31, 2025, stated that the laboratory performed approximately 50 tests annually. Therefore, the accuracy of the laboratory's test results cannot be assured and may have potential to harm patients.</p>