| Statement of Deficiencies | (X1) Provider/Supplier/CLIA Identification Number<br><br>10D0295959 | (X3) Date Survey Completed<br><br>07/22/2020 |
|---|---|---|
| **Name of Provider or Supplier**<br><br>Palm Harbor Dermatology Pa | **Street Address, City, State**<br><br>1849 S Osprey Ave, Sarasota, FL | |
| 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 |
|---|---|
| **D0000** | An announced CLIA recertification survey was conducted at Palm Harbor Dermatology PA on 07/22/20. The laboratory was not in compliance with 42 CFR Part 493, Requirements for Laboratories. The following is a description of the standard level deficiencies: |
| **D5211** | EVALUATION OF PROFICIENCY TESTING PERFORMANCE<br>CFR(s): 493.1236(a)<br><br>The laboratory must review and evaluate the results obtained on proficiency testing performed as specified in subpart H of this part.<br><br>This STANDARD is not met as evidenced by:<br>Based on review of Medical Laboratory Evaluation (MLE) proficiency testing and interview with Licensed Practical Nurse (LPN), the Laboratory Director failed to document the review of the proficiency testing for 1 ( 1st event in 2020 ) out of 4 (1st, 2nd, and 3rd testing events in 2019 and 1st event in 2020 ) testing events reviewed.<br>Findings Included: Review of MLE proficiency testing records for the 2020 1st testing event revealed that the Laboratory Director did not have documentation that the results were reviewed. Interview on 007/22/20 at 01:10 PM with the LPN confirmed that the MLE 2020 1st event proficiency testing did not have Laboratory Director documentation of results reviewed. |