

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 10D0686969	(X3) Date Survey Completed 04/06/2026
Name of Provider or Supplier South Florida Dermatology Group, Inc	Street Address, City, State 401 Coral Way Ste 207, Coral Gables, 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 SOUTH FLORIDA DERMATOLOGY GROUP, INC from March 16, 2026 to April 6, 2026. The laboratory is not in compliance with 42 CFR Part 493, Requirement for Laboratories. The following Condition was cited: D2000 493.801 - Condition: Enrollment and Testing of Samples
D2000	<p>ENROLLMENT AND TESTING OF SAMPLES CFR(s): 493.801</p> <p>Each laboratory must enroll in a proficiency testing (PT) program that meets the criteria in subpart I of this part and is approved by HHS. The laboratory must enroll in an approved program or programs for each of the specialties and subspecialties for which it seeks certification. The laboratory must test the samples in the same manner as patients' specimens. For laboratories subject to 42 CFR part 493 published on March 14, 1990 (55 FR 9538) prior to September 1, 1992, the rules of this subpart are effective on September 1, 1992. For all other laboratories, the rules of this subpart are effective January 1, 1994.</p> <p>This CONDITION is not met as evidenced by: Based on lack of records and staff interview, the laboratory failed to enroll in a Proficiency Testing (PT) program approved by the Department of Health and Human Services (HHS) and Centers for Medicare and Medicaid Services (CMS) for Mycology since January of 2025 through March 9, 2026. The findings included: 1- Review of the test menu listed on the Form CMS-116 signed by the Laboratory Director on 03/10/2026 revealed that the laboratory performed the fungal detection test using the Hardy Diagnostics Dermatophyte Test Medium (DTM) Slant. 2- Review of the patient test results revealed that the laboratory tested 32 patients from 01/02/2025 to 03/09/2026. 3- No approved PT records found for 2025. The laboratory had</p>

performed a twice a year peer review. 4- During a call interview on 04/06/2026 at 1:00 PM the Laboratory Director and Office Manager confirmed that the facility failed to enroll in PT since January of 2025.