

|  |  |   |
|--|--|---|
| <b>Statement of Deficiencies</b>   | <b>(X1) Provider/Supplier/CLIA Identification Number</b><br>10D0943459 | <b>(X3) Date Survey Completed</b><br>08/03/2023 |
| <b>Name of Provider or Supplier</b><br>Abrams Dermatology Llc  | <b>Street Address, City, State</b><br>3328 Bee Ridge Rd, Sarasota, FL  |   |
| 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>D0000</b>              | An announced CLIA recertification survey was conducted at Abrams Dermatology LLC on 08/03/2023. The laboratory is not in compliance with 42 CFR Part 493, Requirements for Laboratories. The following is a description of the standard level deficiency:   |
| <b>D5217</b>              | <p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE<br/>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:<br/>Based on record review and interview, the laboratory failed to ensure the accuracy for twice a year testing in parasitology (scabies) for one (#C) of two Testing Personnel (#B and #C) for one (2022) of two years reviewed (2021-2023). Findings included: Review of the "Fungal Culture Log Sheet" used for Scabies revealed that Testing Personnel #C had verification of accuracy performed one time in 2022 (11/1/22). On 08/03/2023 at 10:10 AM, Testing Personnel #B confirmed twice annual verification of accuracy for scabies was not performed for Testing Personnel #C in 2022. This is a repeat deficiency.</p> |