Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	10D1065839	12/26/2024
Name of Provider or Supplier	**Street Address, City, State**	
Will Richardson Md Pa	1120 Bayview Dr, Fort Lauderdale, 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	A recertification survey was conducted from December 19, 2024 to December 26, 2024. Will Richardson MD PA clinical laboratory was not in compliance with 42 CFR 493, requirements for clinical laboratories.
D5400	ANALYTIC SYSTEMS CFR(s): 493.1250 Each laboratory that performs nonwaived testing must meet the applicable analytic systems requirements in 493.1251 through 493.1283, unless HHS approves a procedure, specified in Appendix C of the State Operations Manual (CMS Pub.7), that provides equivalent quality testing. The laboratory must monitor and evaluate the overall quality of the analytic systems and correct identified problems as specified in 493.1289 for each specialty and subspecialty of testing performed. This CONDITION is not met as evidenced by: Based on observation, record review, and staff interview, the laboratory failed to document daily maintenance and quality control for Mohs testing. See D5433.
D5433	MAINTENANCE AND FUNCTION CHECKS CFR(s): 493.1254(b)(1) For equipment, instruments, or test systems developed in-house, commercially available and modified by the laboratory, or maintenance and function check protocols are not provided by the manufacturer, the laboratory must establish a maintenance protocol that ensures equipment, instrument, and test system performance that is necessary for accurate and reliable test results and test result reporting. The laboratory must perform and document the maintenance activities specified in paragraph (b)(1)(i) of this section.

	This STANDARD is not met as evidenced by: Based on observation, record review, and staff interview, the laboratory failed to document all maintenance and quality control activities one day out of three days of testing in November 2024. Findings included: 1-Review of the daily "Mohs Laboratory Quality Control worksheet" and the "Hematoxylin and Eosin (H&E) Stainer Log" showed no record entry for 11/07/2024. The two days recorded were 11 /14/2024 and 11/21/2024. 2- Review of the daily "MOHS ACCESSION LOG" listed twelve patients who had Mohs surgical procedure on 11/07/2024. 3-Review of the Daily Routine procedure revealed four steps not completed. Step 1. Check and log Temperature on cryostat Step 4. Check and log all paperwork in the log workbook Step 11. Wipe down microscope and document Step 12. At end of the day, clean cryostat according to maintenance log and document. 4-Interview on 12/26/2024 at 11: 45 PM with the laboratory's risk assessment consultant confirmed that the daily logs were not completed for 11/7/2024.