

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 10D2000005	(X3) Date Survey Completed 04/07/2023
Name of Provider or Supplier Dermatology Associates Of Tallahassee Pa	Street Address, City, State 1632 Riggins Rd, Tallahassee, 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 on April 7, 2023. Dermatology Associates of Tallahassee, PA, clinical laboratory was NOT in compliance with 42 CFR 493, Requirements for Laboratories.
D5293	<p>GENERAL LABORATORY SYSTEMS QUALITY ASSESSMENT CFR(s): 493.1239(b)(c)</p> <p>(b) The general laboratory systems quality assessment must include a review of the effectiveness of corrective actions taken to resolve problems, revision of policies and procedures necessary to prevent recurrence of problems, and discussion of general laboratory systems quality assessment reviews with appropriate staff. (c) The laboratory must document all general laboratory systems quality assessment activities.</p> <p>This STANDARD is not met as evidenced by: Based on record review and interview with Testing Person #A, the laboratory failed to document Quality Assessment (QA) activities for 2 of 2 years (2021 - 2022) reviewed. The findings include: On 4/7/23, a record review of Testing Person #A revealed no documentation of QA activities for the years of 2021 and 2022. A follow up interview with Testing Person #A confirmed there was no documentation of QA activity for the years 2021 and 2022.</p>