

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 10D2054904	(X3) Date Survey Completed 08/08/2018
Name of Provider or Supplier Treasure Coast Dermatology	Street Address, City, State 1260 37th St Ste 101, Vero Beach, 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
D5413	<p>TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(b)</p> <p>The laboratory must define criteria for those conditions that are essential for proper storage of reagents and specimens, accurate and reliable test system operation, and test result reporting. The criteria must be consistent with the manufacturer's instructions, if provided. These conditions must be monitored and documented and, if applicable, include the following: (1) Water quality. (2) Temperature. (3) Humidity. (4) Protection of equipment and instruments from fluctuations and interruptions in electrical current that adversely affect patient test results and test reports.</p> <p>This STANDARD is not met as evidenced by: Based on record review and interview, the laboratory failed to record the room temperature and humidity of the room where testing was performed from 8/08/16 to 8/08/18. Findings: Review of laboratory's logs showed that the laboratory failed to record the room temperature and humidity of the room where testing was performed from 8/08/16 to 8/08/18. During an interview on 8/08/18 at 11:05 AM, Mohs Technician A acknowledged that they didn't record the room temperature and humidity for the laboratory.</p>