

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  10D2112196	<b>(X3) Date Survey Completed</b>  03/12/2024
<b>Name of Provider or Supplier</b>  Gary L Curson Dpm Pa Podiatry Foot & Ankle Surgery	<b>Street Address, City, State</b>  9528 Harding Ave, Surfside, 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>	A recertification survey conducted from 03/06/2024 to 03/12/2024 found the GARY L CURSON DPM PA PODIATRY FOOT & ANKLE SURGERY clinical laboratory not in compliance with 42 CFR Part 493, Requirements for Laboratories.
<b>D5217</b>	<p><b>EVALUATION OF PROFICIENCY TESTING PERFORMANCE</b> 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: Based on record review and laboratory consultant interview, the laboratory failed to ensure that one out of two testing personnel (TP) participated in the twice a year accuracy verification for histopathology testing for one out of two years reviewed. Findings included: - Review of FORM CMS 209 Laboratory Personnel Report dated and signed by the Laboratory Director on 03/06/2024 revealed that the Laboratory Director, Technical Supervisor, General Supervisor and TP#A was the same person and that the laboratory had two TP (TP#A and TP#B). -Patient log review revealed that TP#B performed testing on 07/06/2022 and 11/09/2022 -Peer review records revealed that the laboratory failed to have records of peer review for TP#B for the year 2022. -During an interview on 03/06/2023 at 11:30 AM, the laboratory consultant confirmed that the laboratory failed to perform accuracy verification histopathology testing for TP#B during 2022.</p>