

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  10D2123718	<b>(X3) Date Survey Completed</b>  09/07/2018
<b>Name of Provider or Supplier</b>  Michael J Haiken Md Pa	<b>Street Address, City, State</b>  20171 Summerlin Rd, Fort Myers, 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>D5217</b>	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE 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 interview with laboratory personnel, the laboratory did not verify the accuracy of Mohs surgery slides twice annually. Findings include: Review of proficiency testing records on 09/07/18 revealed that proficiency testing was not performed in 2017. During an interview with the laboratory director at 10:21 a.m. on 09/07/18, he confirmed that slides had not been sent out for review in 2017.</p>