

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 10D2153803	(X3) Date Survey Completed 12/04/2018
Name of Provider or Supplier St Petersburg Dermatology	Street Address, City, State 1530 Dr Mlk Jr St N, Saint Petersburg, 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
D5407	<p>PROCEDURE MANUAL CFR(s): 493.1251(d)</p> <p>Procedures and changes in procedures must be approved, signed, and dated by the current laboratory director before use.</p> <p>This STANDARD is not met as evidenced by: Based on record review and interview with the Office Manager, the Laboratory Director failed to sign the procedure manual for approval before testing began in November 2018. Findings Included: Review of the policy and procedure manual revealed that it had not been signed by the Laboratory Director before beginning testing in November 2018. Interview on 12/04/18 at 1:30 PM with the Office Manager confirmed that the procedure manual had not been signed before testing commenced in November 2018.</p>
D6102	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(12)</p> <p>The laboratory director must ensure that prior to testing patients' specimens, all personnel have the appropriate education and experience, receive the appropriate training for the type and complexity of the services offered, and have demonstrated that they can perform all testing operations reliably to provide and report accurate results.</p> <p>This STANDARD is not met as evidenced by: Based on record review and interview with the Office Manager, the laboratory director did not ensure that there was documentation to indicate that two out of two testing personnel (#B and #C) had laboratory training to perform the mycology, parasitology, and histology testing since the laboratory began testing. Findings</p>

included: Review of testing personnel records for Testing Personnel #B revealed no training records were present for histology. A review of the personnel records for Testing Personnel #C revealed no training records for mycology and parasitology testing. Interview on 12/04/2018 at 01:45 PM with the Office Manager confirmed the lack of training records for Testing Personnel #B and #C.