Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	11D0685800	09/25/2026
Name of Provider or Supplier	**Street Address, City, State**	
Dermatology Of Athens	1220 Langford Drive, Bldg 100, Suite 103, Watkinsville, GA	

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 Clinical Laboratory Improvement Amendments (CLIA) recertification survey was completed on September 25, 2026. The laboratory was not in compliance with applicable CLIA requirements found at 42 CFR 493.1 through 42 CFR 493.1780. The following deficiencies were cited:
D5417	TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(d) (d) Reagents, solutions, culture media, control materials, calibration materials, and other supplies must not be used when they have exceeded their expiration date, have deteriorated, or are of substandard quality. This STANDARD is not met as evidenced by: Based on observation and staff interview, the laboratory failed to ensure that reagents were not used after they had exceeded their expiration date. Expired tissue marking dyes were found in the active testing area. Findings: 1. A tour of the laboratory on 9/25 /2026 at approximately 10:08 am revealed expired reagents, actively in use, on the laboratory countertop, in the the specimen preparation area, available for patient testing. Red Tissue Marking Dye (Expired 10-31-2025) Orange Tissue Marking Dye (Expired 11-30-2025) Green Tissue Marking Dye (Expired 11-30-2025) Blue Tissue Marking Dye (Expired 9-30-2025) Yellow Tissue Marking Dye (Expired 4-30-2026) 2. An interview with the office manager, on 9/25/2026, at approximately 10:08 am, in the laboratory confirmed that all 5 tissue marking dyes had expired.
D6004	LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1407(a)(b) The laboratory director is responsible for the overall operation and administration of the laboratory, including the employment of personnel who are competent to perform

	test procedures, and record and report test results promptly, accurate, and proficiently and for assuring compliance with the applicable regulations. (a) The laboratory director, if qualified, may perform the duties of the technical consultant, clinical consultant, and testing personnel, or delegate these responsibilities to personnel meeting the qualifications of 493.1409, 493.1415, and 493.1421, respectively. (b) If the laboratory director reapportions performance of his or her responsibilities, he or she remains responsible for ensuring that all duties are properly performed. This STANDARD is not met as evidenced by: \ Based on observation, record review and staff interview, the laboratory director failed to complete monthly quality arssurance (QA) reviews of the Preanalytic, Analytic and Postanalytic processes to identify and fix problems in the laboratory, as required by the Clinical Laboratory Improvement Amendments. (CLIA). Findings: 1. A tour of the laboratory , on 9/25/2026 , at approximately 10:08 am revealed expired reagents, in use, on the laboratory countertop, in the specimen preparation area, available for patient testing. Red Tissue Marking Dye (Expired 10-31-2025) Orange Tissue Marking Dye (Expired 11-30-2025) Green Tissue Marking Dye (Expired 11-30-2025) Blue Tissue Marking Dye (Expired 9-30-2025) Yellow Tissue Marking Dye (Expired 4-30-2026) 2. An interview with the office manager, in the doctor's office, on 9/25/2026, at approximately 11:00 am, confirmed the laboratory director failed to complete monthly quality assurance (QA) review processes to identify and fix problems in the laboratory.