

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 11D1089837	(X3) Date Survey Completed 09/15/2022
Name of Provider or Supplier Savannah River Dermatology Llc	Street Address, City, State 575 Furrys Ferry Road, Martinez, 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 15, 2022. 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:
D5221	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(d)</p> <p>All proficiency testing evaluation and verification activities must be documented.</p> <p>This STANDARD is not met as evidenced by: Based on review of proficiency test(PT) documents and staff review, the laboratory failed to perform required correction action for PT results for unacceptable /unsatisfactory evaluations. The Findings include: 1. American Academy of Family Physicians(AAFP) PT document review revealed there was no corrective action documented for Mycology Dermatophyte Test Medium Screens for PT testing in 2022 Event B. 2. During an interview with the Laboratory Director (CMS-209) on September 15, 2022 at 2:30 PM, it was confirmed that the TP and LD failed to complete a corrective action for the PT in 2022 for Event B.</p>
D6092	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(4)(iv)</p> <p>The laboratory director must ensure an approved corrective action plan is followed when any proficiency testing result is found to be unacceptable or unsatisfactory.</p> <p>This STANDARD is not met as evidenced by: Based on review of the laboratory's Proficiency Testing (PT) records and staff interview, the laboratory director (LD) failed to ensure an approved corrective action</p>

plan is followed when any PT result is found to be unacceptable/unsatisfactory. Findings include: 1. Review of PT records for 2021 revealed the laboratory received a score of 80% on 2022-Event B for the Mycology DTM-Dermatophyte Test Medium. 2. During an interview with the Laboratory Director (CMS-209) on September 15, 2022 at approximately 2:30 PM, confirmed the LD failed to ensure an approved correction plan was followed for PT results that were unacceptable/unsatisfactory.