

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 13D1096028	(X3) Date Survey Completed 05/08/2025
Name of Provider or Supplier Alpine Dermatology Clinic	Street Address, City, State 1049 Summers Dr, Rexburg, ID	
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	During an offsite paper revisit the laboratory was found to be in compliance with CLIA regulations (42 CFR Part 493 effective April 24, 2003.), all previous deficiencies found were corrected.
D5217	<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 a record review of Mohs bi-annual verification and an interview with the facility administrator on 5/8/2025, the laboratory failed to verify the accuracy of Mohs slide examinations at least twice annually in 2023 and 2024. The findings include: 1. A record review of bi-annual verification identified that the laboratory failed to verify the accuracy of Mohs slide examinations twice in 2023 and once in 2024. 2. An interview with the facility administrator on 5/8/2025 at 10:11 am confirmed that the laboratory did not verify the accuracy of Mohs slide examination twice annually for 2023 and 2024. 3. The laboratory reports performing 200 Mohs slide examinations annually.</p>
D5417	<p>TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(d)</p> <p>(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.</p> <p>This STANDARD is not met as evidenced by:</p>

Based on a direct observation and an interview with the facility administrator on 5/8/2025, the laboratory failed to discontinue the use of expired reagents. The findings include: 1. A direct observation of the laboratory's reagents on 5/8/2025 identified that the laboratory failed to discontinue the use of the following reagents prior to the expiration: Avantik tissue marking dye-green lot 156625 expiration 2024-08-31 Avantik tissue marking dye-green lot 144651 expiration 2024-03-31 Avantik tissue marking dye-green lot 112722 expiration 2022-12-31 Avantik tissue marking dye-red lot 089147 expiration 2021-08-31 Avantik tissue marking dye-red lot 112131 expiration 2022-12-31 Avantik tissue marking dye-red lot 168107 expiration 2025-02-28 Avantik tissue marking dye-blue lot 087417 expiration 2021-09-30 Avantik tissue marking dye-blue lot 113806 expiration 2022-12-31 Avantik tissue marking dye-yellow lot 111915 expiration 2022-12-31 Avantik tissue marking dye-black lot 112649 expiration 2022-12-31 Delasco 20% KOH w/DMSO lot K163M6 expiration March 2019 INC Wash Buffer lot 20200817 expiration 2022-08-06 2. An interview with the facility administrator on 5/8/2025 at 9:34 am confirmed the above finding. 3. The laboratory reports performing 300 tests annually.