

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 13D2267834	(X3) Date Survey Completed 11/01/2024
Name of Provider or Supplier Ada West Dermatology-Barber Station	Street Address, City, State 3100 E Barber Valley Dr, Boise, 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
D5429	<p>MAINTENANCE AND FUNCTION CHECKS CFR(s): 493.1254(a)(1)</p> <p>For unmodified manufacturer's equipment, instruments, or test systems, the laboratory must perform and document maintenance as defined by the manufacturer and with at least the frequency specified by the manufacturer.</p> <p>This STANDARD is not met as evidenced by: Based on a direct observation of laboratory equipment, a review of cryostat records, and an interview with the Mohs lead on 11/1/2024, the laboratory failed to perform maintenance as required by the manufacturer for the Avantik QS12 cryostat. The findings include: 1. A direct observation in the laboratory identified an Avantik QS12 cryostat. 2. A review of the cryostat records identified that the laboratory failed to have a maintenance log and document maintenance of the cryostat since beginning testing in February 2024. 3. An interview with the Mohs lead on 11/1/2024 at 9:57 am confirmed the lack of maintenance documentation for the Avantik QS12 cryostat. 4. The laboratory reports performing 1200 Mohs slide examinations annually.</p>