

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  14D0430744	<b>(X3) Date Survey Completed</b>  03/06/2025
<b>Name of Provider or Supplier</b>  Medical Arts Associates, Ltd	<b>Street Address, City, State</b>  600 John Deere Rd Suite 200, Moline, IL	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D5221</b>	<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 laboratory records, lack of documentation, and interviews with technical supervisor (TS) #1 and the laboratory director (LD), the laboratory failed to evaluate results of Mohs bi-annual method accuracy (proficiency testing/peer reviewed histopathology interpretations) for ten of ten slide reviews from the beginning of 2023 to the date of survey, 03/06/2025. Findings include: 1. Review of laboratory records revealed ten Mohs bi-annual method accuracy slide reviews from the beginning of 2023 to the date of survey, 03/06/2025. Date: Case #: 01/19/2023 M-23-012 03/13/2023 M-22-068 03/21/2023 M-23-057 02/13/2024 M-23-016 02/28/2024 M-24-023 02/28/2024 M-24-024 05/15/2024 M-24-096 08/20/2024 M-25-023 01/22/2025 M-25-023 02/11/2025 M-25-041 2. Review of laboratory records revealed a lack of documentation of evaluations of results upon receipt of peer reviewed Mohs histopathology interpretations for ten of ten reviewed bi-annual method accuracy slide reviews. 3. Interviews with TS #1 and the LD on 03/06/2025, at 04:07 pm, confirmed the laboratory failed to evaluate results of bi-annual method accuracy for ten of ten slide reviews from the beginning of 2023 to the date of survey, 03/03/2025.</p>