

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 14D1074608	(X3) Date Survey Completed 08/12/2025
Name of Provider or Supplier Md Skincenter	Street Address, City, State 1235 N Mulford Rd Ste 205, Rockford, IL	
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
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 laboratory records, lack of documentation, and interview with the laboratory director (LD); the laboratory failed to document evaluation of results for Mohs bi-annual method accuracy (proficiency testing/peer reviewed histopathology interpretations) for 15 of 15 cases reviewed from the beginning of 2023 to the date of survey, 08/12/2025. Findings include: 1. Review of laboratory policies and procedures revealed the policy, "Quality Assessment Testing", which stated, under "Procedure", "5. Results will be review immediately by the Lab Director". 2. Review of laboratory records revealed five Mohs bi-annual method accuracy reviews from the beginning of 2023 to the date of survey, 08/12/2025. Year: Event: Cases: 2023 Spring 3 2023 Fall 3 2024 Spring 3 2024 Fall 3 2025 Spring 3 3. Review of laboratory records revealed a lack of documentation of review by the LD for 15 of 15 Mohs histopathology bi-annual method accuracy cases. 4. Interview with the LD on 08/12/2025, at 12:48 pm, confirmed the laboratory failed to document evaluation of results for bi-annual method accuracy for 15 of 15 cases reviewed from the beginning of 2023 to the date of survey, 08/12/2025.</p>