

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 14D2095853	(X3) Date Survey Completed 08/20/2026
Name of Provider or Supplier Clear Skin Dermatology	Street Address, City, State 1050 W Chicago Ave, Oak Park, 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
D5217	EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1) 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. This STANDARD is not met as evidenced by: Based on review of laboratory policies and procedures, laboratory records, lack of documentation, and interview with the Laboratory Director (LD), the laboratory failed to perform bi-annual method accuracy (proficiency testing/peer reviewed histopathology interpretations) for Mohs Micrographic surgery testing in 2024 and 2025. Findings include: 1. Review of laboratory policies and procedures revealed the document titled, "Proficiency Testing", which stated, under "Mohs Micrographic surgery skin specimens ", "Semi-annually, the tech or Risk Manager will send two cases containing the original slides, label it with only the surgical case number, and send it out for a microscopic examination by a board certified dermatopathologist." 2. Review of laboratory records revealed that the laboratory failed to send out proficiency cases semi-annually since starting Mohs Micrographic surgery testing in August of 2024. Date range: Date of PT review: 08/2024 - 08/2025 01/09/2026 08/2025 - 08/2026 07/06/2026 3. Interview with the LD on 08/20/2026, at 11:40 am, confirmed the laboratory failed to perform bi-annual method accuracy (proficiency testing/peer reviewed interpretations) for Mohs micrographic surgery testing semi-annually as required starting in August of 2024 through the date of survey 08/20/2026.