

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 14D2142114	(X3) Date Survey Completed 01/28/2026
Name of Provider or Supplier Oak Dermatology	Street Address, City, State 550 E Devon Ave - Ste 200, Itasca, 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	<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 review of laboratory policies and procedures, laboratory records, lack of documentation, and interview with the laboratory representative; the laboratory failed to perform biannual method accuracy (proficiency testing/peer reviewed Mohs micrographic carcinoma exclusion results) for four of four Mohs events performed in 2024 and 2025 in the subspecialty of histopathology. Findings include: 1. Review of laboratory policies and procedures revealed the policy titled "Proficiency Testing Policy", which stated, under "3. Mohs Proficiency Testing (Slide Review)", "ResultsIf it appears there is a positive margin that was not[e] detected, the patient will be called" 2. Review of biannual method accuracy documentation for Mohs micrographic cases revealed the diagnostic interpretation of the carcinoma was peer-reviewed by an outside reviewer, not the accuracy of the Mohs micrographic carcinoma exclusion procedure. Year/Event: Mohs Case #: Diagnosis: 2024/1st Event 1-ABM-24-0003 SCC* 2024/1st Event 1-ABM-24-0012 SCC 2024/1st Event 1-ABM-24-0023 BCC** 2024/1st Event 1-ABM-24-0028 BCC 2024/1st Event 1-ABM-24-0033 BCC 2024/2nd Event 1-ABM-24-0032 BCC 2024/2nd Event 1-ABM-24-0043 BCC 2024/2nd Event 1-ABM-24-0070 BCC 2024/2nd Event 1-ABM-24-0083 SCC 2024/2nd Event 1-ABM-24-0093 BCC 2025/1st Event 1-ABM-25-0006 SCC 2025 /1st Event 1-ABM-25-0016 BCC 2025/1st Event 1-ABM-25-0037 SCC 2025/1st Event 1-ABM-25-0045 BCC 2025/1st Event 1-ABM-25-0059 BCC 2025/2nd Event 1-ABM-25-0075 SCC 2025/2nd Event 1-KBM-25-0001 SCC 2025/2nd Event 1-KBM-25-0014 SCC 2025/2nd Event 1-KBM-25-0040 SCC 2025/2nd Event 1-KBM-25-0078 BCC *SCC = Squamous Cell Carcinoma **BCC = Basal Cell Carcinoma 3. Interview with the laboratory representative on 01/28/2026, at 10:27 am, confirmed</p>

the laboratory failed to perform biannual method accuracy (proficiency testing/peer reviewed Mohs micrographic carcinoma exclusion results) for four of four Mohs events performed in 2024 and 2025 in the subspecialty of histopathology.

D6120

TECHNICAL SUPERVISOR RESPONSIBILITIES

CFR(s): 493.1451(b)(7)(8)

(b)(7) Identifying training needs and assuring that each individual performing tests receives regular in-service training and education appropriate for the type and complexity of the laboratory services performed; (b)(8) Evaluating the competency of all testing personnel and assuring that the staff maintain their competency to perform test procedures and report test results promptly, accurately and proficiently.

This STANDARD is not met as evidenced by:

Based on review of the CMS-209 (Laboratory Personnel Report) Form, laboratory policies and procedures, laboratory records, lack of documentation, and interview with testing personnel (TP) #8; the technical supervisor (TS) failed to evaluate the competency of five of five TP performing microscopic scabies wet mount testing in the subspecialty of parasitology in the years of 2024 and 2025. Findings include: 1. Review of the CMS-209 (Laboratory Personnel Report) Form revealed five TP performing microscopic scabies wet mount testing (TP #2, TP #3, TP #5, TP #6, and TP #7). 2. Review of laboratory policies and procedures revealed the policy titled "Competency Assessment Policy", which stated, under "2. Scabies Competency Assessment", "Documentation ...Results of the evaluation will be documented on the Scabies Competency Assessment form by the performing provider." 3. Review of laboratory competency records revealed a lack of documented scabies competency assessment for all five TP performing microscopic scabies wet mount testing in 2024 and 2025. 4. Interview with TP #8 on 01/28/2026, at 10:29 am, confirmed the TS failed to evaluate the competency of five of five TP performing microscopic scabies wet mount testing in the subspecialty of parasitology in the years of 2024 and 2025.