

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  15D0687550	<b>(X3) Date Survey Completed</b>  05/16/2019
<b>Name of Provider or Supplier</b>  Eagle Creek Dermatology	<b>Street Address, City, State</b>  6820 Parkdale Pl Ste 211, Indianapolis, IN	
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>D5407</b>	<p>PROCEDURE MANUAL CFR(s): 493.1251(d)</p> <p>Procedures and changes in procedures must be approved, signed, and dated by the current laboratory director before use.</p> <p>This STANDARD is not met as evidenced by: Based on document review and staff interview, the laboratory failed to date revised procedures for one of one procedure manual covering three of three tests performed [Potassium hydroxide (KOH) preparations, Scabies preparation, and histology testing]. Findings include: 1. Review of procedure manual "IV Procedures for Tests Performed, C. Histology Specimens", signed by E3 (laboratory director) but no date of signature, indicated a change in procedure by adding employee E5 (medical doctor), hire date 10-03-18. The only date on the procedure was "Procedure began 07-01-1982". 2. Review of procedure manual "KOH preparation" and "Skin Scraping for Scabies Preparation", signed by E3 (laboratory director) but no date of signature, indicated a change in procedures by adding employee E5 (medical doctor), hire date 10-03-18. The last update on the procedures was 12-06-1993. 3. On 10-16-19 at 2:05 PM E1 (medical assistant), confirmed the procedures were updated after E5 was hired, but no revision dates were added to the procedures.</p>