

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 17D2105533	<b>(X3) Date Survey Completed</b> 11/02/2018
<b>Name of Provider or Supplier</b> Ricks Advanced Dermatology & Skin Surgery Pa	<b>Street Address, City, State</b> 5120 Sw 28th Street, Topeka, KS	
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>D5200</b>	<p>GENERAL LABORATORY SYSTEMS CFR(s): 493.1230</p> <p>Each laboratory that performs nonwaived testing must meet the applicable general laboratory systems requirements in 493.1231 through 493.1236, unless HHS approves a procedure, specified in Appendix C of the State Operations Manual (CMS Pub. 7), that provides equivalent quality testing. The laboratory must monitor and evaluate the overall quality of the general laboratory systems and correct identified problems specified in 493.1239 for each specialty and subspecialty of testing performed.</p> <p>This CONDITION is not met as evidenced by: Based on review of proficiency testing (PT) and interview, the laboratory failed to evaluate proficiency testing performance (refer to D5217).</p>
<b>D5217</b>	<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 proficiency testing (PT) and interview with the office manager the laboratory failed to twice annually, verify the accuracy of pathology for 2017 to date November 11, 2018.</p>