

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 17D2133901	(X3) Date Survey Completed 01/22/2021
Name of Provider or Supplier Advanced Dermatology And Skin Cancer Center, Pa	Street Address, City, State 2509 W 18th Avenue, Emporia, KS	
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
D5401	<p>PROCEDURE MANUAL CFR(s): 493.1251(a)</p> <p>A written procedures manual for all tests, assays, and examinations performed by the laboratory must be available to, and followed by, laboratory personnel. Textbooks may supplement but not replace the laboratory's written procedures for testing or examining specimens.</p> <p>This STANDARD is not met as evidenced by: Based on the review of the procedure manual and interview, the laboratory failed to follow the procedure for cryostat maintenance requirements and quality assurance review for slide labeling. Findings: 1. Review of procedure for cryostat maintenance revealed cryostat should be defrosted every six months and air filter to be changed every 3 months. 2. Review of maintenance records for the cryostat from 1/16/2019 to 12/29/2020 revealed only one entry for defrost on 5/27/2020 and no entries for air filter replacement. 3. Review of procedure for quality assurance revealed labels and Mohs maps are to be reviewed with another person to confirm before completion. Mohs map should be initialed by reviewer. 4. Review of Mohs maps revealed no initials by review present on maps provided at the time of survey. Testing personnel (TP) #1 stated he was reviewing the slides himself and not having a second person reviewing map and labels. 5. Interview with TP#1 January 22, 2021 at 11:05 a.m. confirmed, the laboratory failed to follow the procedure for cryostat maintenance requirements and quality assurance review for slide labeling.</p>