

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  19D0683673	<b>(X3) Date Survey Completed</b>  01/30/2025
<b>Name of Provider or Supplier</b>  Calais Dermatology Assoc	<b>Street Address, City, State</b>  5220 Flanders Dr, Baton Rouge, LA	
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>D0000</b>	A Recertification survey was conducted January 30, 2025 at Calais Dermatology Assoc - CLIA ID # 19D0683673. The laboratory was found in compliance with 42 CFR 493 Requirement for Laboratories; however, standard level deficiencies were cited.
<b>D5217</b>	<p><b>EVALUATION OF PROFICIENCY TESTING PERFORMANCE</b> 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 the laboratory's policies and proficiency testing records as well as interview with personnel, the laboratory failed to verify the accuracy of performance for Potassium Hydroxide (KOH) testing at least twice per year in 2023. Findings: 1. Review of the laboratory's proficiency testing/competency policy revealed "This process is performed to ensure the accuracy and competency of microscopic potassium hydroxide (KOH) preparation and reading by the facilities testing personnel. This evaluation will be performed on a semiannual basis. If insufficiencies are detected, additional training and education will be provided by the Laboratory Director." 2. Review of the laboratory's proficiency testing records for 2023 revealed the laboratory verified their performance of KOH testing on June 27, 2023, but did not perform a second verification in 2023. 3. In interview on January 30, 2025 at 9:45 a. m., office personnel confirmed the laboratory did not verify KOH performance twice per year as identified above.</p>
<b>D6087</b>	<p><b>LABORATORY DIRECTOR RESPONSIBILITIES</b> CFR(s): 493.1445(e)(3)(iii)</p> <p>(e)(3)(iii) Laboratory personnel are performing the test methods as required for</p>

accurate and reliable results;

This STANDARD is not met as evidenced by:

Based on record review and interview with personnel, the Laboratory Director failed to ensure the laboratory personnel performed test methods as required. Refer to D5217.