

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  19D1031513	<b>(X3) Date Survey Completed</b>  06/23/2025
<b>Name of Provider or Supplier</b>  Mohs Surgery Specialists Llc	<b>Street Address, City, State</b>  4950 Essen Lane, Suite 301, 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 performed at Mohs Surgery Specialists, LLC, CLIA ID 19D1031513, on June 23, 2025. The laboratory was found in compliance with 42 CFR 493 Requirements for Laboratories; however, standard level deficiencies were cited.
<b>D5429</b>	<p>MAINTENANCE AND FUNCTION CHECKS CFR(s): 493.1254(a)(1)</p> <p>(a)(1) Maintenance as defined by the manufacturer and with at least the frequency specified by the manufacturer.</p> <p>This STANDARD is not met as evidenced by: Based on observation by surveyor, review of the manufacturer's instrument manual, the laboratory's maintenance records, and interview with personnel, the laboratory failed to perform the preventative maintenance (PM) annually for the two (2) Leica cryostats for two (2) of two (2) years reviewed. Findings: 1. Observation by surveyor during the laboratory tour on June 23, 2025 at 9:54 am revealed the laboratory utilized two (2) Leica cryostats for Mohs (Histopathology) testing. 2. Review of the Leica instrument manual under the "Cleaning and maintenance" section revealed "Have the instrument inspected by a qualified service engineer authorized by Leica at least once a year." 3. Review of the laboratory's maintenance records for the cryostats revealed the annual PM for 2023 and 2024 were not performed. 4. In interview on June 23, 2025 at 11:23 am, Histotech 1 stated she could not find the PM documentation for 2023. Histotech 1 also stated the PM was performed in January 2025, not in 2024.</p>
<b>D6095</b>	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(6)</p> <p>(e)(6) Ensure the establishment and maintenance of acceptable levels of analytical performance for each test system;</p>

This STANDARD is not met as evidenced by:  
Based on observation by surveyor, review of the manufacturer's instrument manual, the laboratory's maintenance records, and interview with personnel, the Laboratory Director failed to ensure maintenance procedures were followed to ensure acceptable levels of test performance. Refer to D5429.