

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 19D2028358	(X3) Date Survey Completed 10/18/2018
Name of Provider or Supplier Green Clinic Mohs Laboratory	Street Address, City, State 1200 S Farmerville Hwy, Ruston, LA	
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
D0000	A Certification Survey was performed on October 18, 2018 at Green Clinic Mohs Laboratory, CLIA ID # 19D2028358. The laboratory was found in compliance with 42 CFR 493 Requirements for Laboratories; however, standard level deficiencies were cited.
D5417	<p>TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(d)</p> <p>Reagents, solutions, culture media, control materials, calibration materials, and other supplies must not be used when they have exceeded their expiration date, have deteriorated, or are of substandard quality.</p> <p>This STANDARD is not met as evidenced by: Based on observation and interview with personnel, the laboratory failed to ensure supplies have not exceeded their expiration date. Findings: 1. Observation by surveyor during laboratory tour on October 18, 2018 revealed the following expired items: a) Lidocaine HCl 2% - (2) 50 ml bottle Lot 53-348-DK Exp 5/1/17 b) Lidocaine HCl 2% - (1) 50 ml bottle Lot 38-400-DK Exp 2/1/16 c) 0.9% Sodium Chloride Inj, USP Sterile Diluent - (2) 20ml vials Lot 51-140-DK Exp 3/1/17 d) Sterile Water for Inj, USP - (4) 10ml vials Lot 33-408-DK Exp 9/1/16 e) Sterile Wter for Inj, USP - (1) 10ml vial Lot 40-373-DK Exp 4/1/17 2. In interview on October 18, 2018 at 10:24 am, the Laboratory Director stated the cabinet was moved in for more space and vials were still in drawer but had not been used. The Laboratory Director confirmed the supplies were expired.</p>
D6087	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(3)(iii)</p> <p>The laboratory director must ensure that laboratory personnel are performing the test methods as required for accurate and reliable results.</p>

This STANDARD is not met as evidenced by:
Based on observation, record review and interview with laboratory personnel, the Laboratory Director failed to ensure laboratory personnel performed test methods as required for accurate and reliable test results. Refer to D5417.