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| Statement of Deficiencies | (X1) Provider/Supplier/CLIA Identification Number 21D0212684 | (X3) Date Survey Completed 01/15/2025 |
| Name of Provider or Supplier Dermatology And Advanced Skin Care | Street Address, City, State 8890 Mcgaw Rd Suite 150, Columbia, MD | |
| 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 |
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| D5221 | <p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(d)</p> <p>All proficiency testing evaluation and verification activities must be documented.</p> <p>This STANDARD is not met as evidenced by: Based on procedure manual and proficiency testing (PT) record review and interview with laboratory staff, the laboratory failed to ensure that histopathology PT results were evaluated and the review documented. Findings: 1. The procedure, "Quality Assurance Program" states that the laboratory should "submit 2 cases every six months to an outside Pathologist" for PT, and that "the Pathology report is attached to and retained as a method for proficiency testing." 2. PT record review showed that the laboratory fills out the "Quality assurance, proficiency testing" form with the case number of each of the two cases submitted to the outside pathologist for PT. The form requires the outside pathologist to evaluate the "Sectioning quality," "Staining quality," and to circle a "Diagnosis" of "Negative (no tumor) / Positive (tumor) / Benign lesion." The form is signed by the outside pathologist. 3. A review of PT records from 2023 and 2024 showed that on 10/10/2023 the outside pathologist interpreted "Case # 23-140" as "Negative" and "Case # 23-290" as "Positive"; on 02/22/2024 they interpreted "Case # 23-576" as "Negative" and "Case # 24-33" as "Benign lesion"; and on 12/09/2024 they interpreted "Case 24-171" as "Positive" and "Case # 24-400" as "Benign lesion." 4. The PT records did not include the pathology report for each case, which documents the original interpretation. There was no documentation on three of three "Quality assurance, proficiency testing" forms reviewed that the laboratory director had evaluated the PT results and determined whether the laboratory had passed the PT. 5. During an interview on 01/15/2025 at 12:45 PM the laboratory staff confirmed that the laboratory failed to evaluate and document the results of histopathology PT.</p> |