

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 21D0688709	(X3) Date Survey Completed 02/21/2024
Name of Provider or Supplier Anne Arundel Dermatology, Pa	Street Address, City, State 995 N Prince Frederick Blvd #204, Prince Frederick, 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
D6094	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(5)</p> <p>The laboratory director must ensure that the quality assessment programs are established and maintained to assure the quality of laboratory services provided and to identify failures in quality as they occur.</p> <p>This STANDARD is not met as evidenced by: Based on review of the "Control Slide Log", "Complaint Log" worksheet, and interview with the manager, the laboratory director (LD) failed to ensure that corrective actions were documented on the "Complaint Log" when the "H&E (haematoxylin and eosin) Stain Quality" was not documented as satisfactory on the "Control Slide Log." Findings: 1. Review of the "Control Slide Log" for 2023 showed that on 3/24/23 and 4/17/23 the 'H&E Stain Quality' was documented as "too pink" and the log did not indicate that the stain quality was satisfactory on both dates. 2. According to the manager, the procedure manual requires the staff to document any corrective actions on the "Complaint Log" along with any additional information. Review of the "Complaint Log" binder showed that no corrective actions were documented on 3/24/23 and 4/17/23. 3. During the exit interview on 02/21/2024 at 11:00 AM, the manager confirmed that the LD failed to ensure that corrective actions were documented when the "H&E Stain Quality" was not documented as satisfactory on the "Control Slide Log" during the quality assurance reviews.</p>