Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	21D2043930	02/09/2023
Name of Provider or Supplier	**Street Address, City, State**	
Anne Arundel Dermatology	7671 Quarterfield Road Ste 200 A-B, Glen Burnie, 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
D5203	SPECIMEN IDENTIFICATION AND INTEGRITY CFR(s): 493.1232 The laboratory must establish and follow written policies and procedures that ensure positive identification and optimum integrity of a patient's specimen from the time of collection or receipt of the specimen through completion of testing and reporting of results. This STANDARD is not met as evidenced by: Based on procedure manual, laboratory patient log, and patient electronic medical record (EMR) review and interview with the laboratory staff, the laboratory did not follow the established policies and procedures to ensure positive identification of a patient's specimen from the time of collection or receipt of the specimen through completion of testing and reporting of results. Findings: 1. The laboratory performs histopathology testing on patient specimens from Mohs surgery. The patients are entered on a patient log, where they are assigned a case number. The procedure manual states that the case number must include the last two digits of the current year followed by the next sequence number for that year. 2. A random review of patient records showed that Patient A was listed as "Case # 23-113" in the patient log. Examination of Patient A's histology slides showed that they were labeled correctly with "23-113," however a review of the patient final report in the EMR showed that the case number in the "final visit note" was documented as "22-113." 3. The procedure "Quality Control Program," subheading, "Data Validation" states, "The Mohs physician will review the record for accuracy ensuring that the test results are correctly entered" and "If the information is correct, the Mohs physician will electronically sign the record. Their signature notes that the record was review and that all the data has been validated as correct." 4. During an interview on 02/09/2023 at 10:30 AM, the laboratory staff confirmed that written policies and procedures that ensure positive identification of histology specimens from the time of collection or

	receipt of the specimen through completion of testing and reporting of results were not followed.