

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  21D2113855	<b>(X3) Date Survey Completed</b>  07/22/2021
<b>Name of Provider or Supplier</b>  Sanjiv K Saini, Md Llc	<b>Street Address, City, State</b>  3168 Braverton Street, Suite 340, Edgewater, MD	
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>D5217</b>	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1)</p> <p>At least twice annually, the laboratory must verify the accuracy of any test or procedure it performs that is not included in subpart I of this part.</p> <p>This STANDARD is not met as evidenced by: Based on procedure manual and proficiency testing (PT) record review and interview with the histotechnician, the laboratory did not ensure that PT was performed at least twice annually for all tests performed in the laboratory. Findings: 1. The procedure, "Quality Assurance Program," "Comparison of Test Results" states, "A review of the test results on each Mohs provider is preformed bi-annually." 2. PT record review from 2019 through 2020 showed that slides from 3 histopathology cases were reviewed in 2019 and that 1 histopathology case was reviewed in 2020; and 3. All of the PT slides were reviewed on 3/31/2021. 3. During an interview on 7/22/2021 at 11:45 AM, the histotechnician confirmed that the laboratory did not ensure that it verified the accuracy of histopathology testing at least twice annually.</p>