

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 22D0687234	(X3) Date Survey Completed 03/15/2022
Name of Provider or Supplier Adult & Pediatric Dermatology, Pc	Street Address, City, State 133 Littleton Road, Ste 310, Westford, MA	
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 CLIA recertification survey was conducted for the Adult & Pediatric Dermatology, PC laboratory pursuant to the Clinical Laboratory Improvement Amendments (CLIA) of 1988 and CLIA regulations at 42 CFR 493. .
D5891	<p>POSTANALYTIC SYSTEMS QUALITY ASSESSMENT CFR(s): 493.1299(a)</p> <p>The laboratory must establish and follow written policies and procedures for an ongoing mechanism to monitor, assess and, when indicated, correct problems identified in the postanalytic systems specified in 493.1291.</p> <p>This STANDARD is not met as evidenced by: Based on record review and interview the laboratory failed to assess postanalytic systems quality assessment activities as evidenced by the following: a) A review of the laboratory's preanalytical monitoring for calendar years 2020 and 2021 showed that the lab had policies and procedures for monitoring post analytic problems. Histotechnician number 6 was asked for a total of corrected reports for calendar year 2021. She replied that it was approximately 300. The following list of corrected reports include but are not limited to the following problems: 1. Case number ADP21-17728 - corrected report for body site location. 2. Case number DA21-9529 - corrected report for grossing site. 3. Case number ADP21-25397 - corrected report for office procedure. 4. Case number ADP21-24637 - corrected report for two specimens on the same patient where biopsy sites were switched. 5. Case number ADP21-10017 - corrected report for date of service. However, there was no ongoing assessment of these problems to identify trends or patterns that needed to be addressed and corrected. b) The Histotechnician confirmed in an interview on 3/15/22 at 10:40 AM that corrected reports data was not being compiled in order to track trends or patterns that needed to be addressed and corrected. c) The laboratory performs approximately 90,000 histopathology tests annually.</p>