

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 23D0371496	(X3) Date Survey Completed 03/08/2023
Name of Provider or Supplier Georgetown Dermatologists Pc	Street Address, City, State 39242 Dequindre Ste 105, Sterling Heights, MI	
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
D5209	<p>PERSONNEL COMPETENCY ASSESSMENT POLICIES CFR(s): 493.1235</p> <p>As specified in the personnel requirements in subpart M, the laboratory must establish and follow written policies and procedures to assess employee and, if applicable, consultant competency.</p> <p>This STANDARD is not met as evidenced by: . Based on record review and interview with the Office Manager, the laboratory failed to ensure testing personnel competency was performed for 1 (Testing Personnel #1) of 2 testing personnel listed on Form CMS-209 performing Scabies and Potassium Hydroxide (KOH) preparations. Findings include: 1. A review of the laboratory's Michigan Dermatological Society Certificates of Completion for Testing Personnel #1 revealed a lack of documentation for exams completed in 2022 for Scabies and KOH preparations. 2. A review of patient test records revealed a total of three patients had received Scabies or KOH preparation testing in 2022. 3. An interview on 3/8/23 at 10:50 am with the Office Manager revealed the laboratory used the Michigan Dermatological Society exams to meet the testing personnel competency requirements for Testing Personnel #1 and they had not been completed in 2022.</p>
D5217	<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 record review and interview with the Office Manager, the laboratory failed to verify the accuracy of its Scabies and Potassium Hydroxide (KOH) preparations at</p>

least twice annually for 1 (2022) of 2 years reviewed. Findings include: 1. A review of the laboratory's "Potassium Hydroxide (KOH) Examination" procedure revealed a section titled "Quality Control" stating, "Quality control will consist of one or both of the following: 1. Successfully participating in the laboratory assessment program held biannually through the Michigan Derm. Society. 2. Successfully interpreting slides and having slides reviewed by another practicing dermatologist twice yearly. 3. Two successful completions of the above activity constitutes adequate Quality Control." 2. A review of the laboratory's "Ectoparasites" procedure revealed a section titled "Quality Control" stating "Quality control will consist of one or both of the following: 1. Successfully participating in the laboratory assessment program held biannually through the Michigan Derm. Society. 2. Successfully interpreting slides and having slides reviewed by another practicing dermatologist twice yearly. 3. Two successful completions of the above activity constitutes adequate Quality Control." 3. A review of the laboratory's Michigan Dermatological Society Certificates of Completion for Testing Personnel #1 revealed a lack of documentation for exams completed in 2022 for Scabies and KOH preparations. 4. A review of patient test records revealed a total of three patients had received Scabies or KOH preparation testing in 2022. 5. An interview on 3/8/23 at 10:50 am with the Office Manager revealed Michigan Dermatological Society exams had not been completed in 2022 and no documentation of slide interpretation by a second provider was present.