

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 23D0694147	(X3) Date Survey Completed 11/22/2022
Name of Provider or Supplier Psoriasis And Eczema Treatment Center	Street Address, City, State 597 Baldwin St, Jenison, 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
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 laboratory liaison (LL), the laboratory failed to verify the accuracy of the potassium hydroxide (KOH) and scabies preparation testing for 1 (2022) of 1 and a half years reviewed. Findings include: 1. A review of the laboratory's "CLIA Manual" revealed a lack of documentation of the twice annual verification of accuracy testing for KOH and scabies preparations for 2022. 2. An interview on 11/22/2022 at 10:07 am, the LL confirmed the laboratory did not perform and documentation twice annual verification of accuracy testing for KOH and scabies preparations for 2022. ***Repeat deficiency from 4/12/2021 survey***</p>