

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  23D1027708	<b>(X3) Date Survey Completed</b>  06/16/2021
<b>Name of Provider or Supplier</b>  Messenger Dermatology - Compass Health	<b>Street Address, City, State</b>  1775 E Bellows, Mount Pleasant, MI	
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>D3031</b>	<p><b>RETENTION REQUIREMENTS</b> CFR(s): 493.1105(a)(3)</p> <p>Analytic systems records. Retain quality control and patient test records (including instrument printouts, if applicable) and records documenting all analytic systems activities specified in 493.1252 through 493.1289 for at least 2 years.</p> <p>This STANDARD is not met as evidenced by:</p> <ul style="list-style-type: none"> <li>. Based on record review and interview with Testing Personnel (TP) #6, the laboratory failed to retain the histopathology Mohs' peer review (verification of accuracy) for 2 (6/2019 to 3/2021) of 2 years reviewed. Findings include: 1. Record review for the Mohs' physicians peer review revealed a lack of documentation from 6/2019 to 3/2021. 2. When queried on 6/16/2021, TP6 acknowledged that the supervisor from the Lansing office provided a note that stated "I misplaced his Mt. Pleasant peer review." 3. An interview on 6/16/2021 at 10:14 am, TP6 confirmed the Mohs' physicians peer review was misplaced.</li> </ul>