

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 24D0897250	(X3) Date Survey Completed 01/06/2021
Name of Provider or Supplier Advanced Dermatology Care	Street Address, City, State 4480 Centerville Rd, White Bear Lake, MN	
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 document review and interview with laboratory personnel, the laboratory failed to perform and document activities used to verify the accuracy of the single Histopathology test performed in the laboratory at least twice annually in 2019 & 2020. Findings are as follows: 1. The laboratory performed Mohs micrographic surgery with microscopic examination under the specialty of Histopathology as confirmed by the Histology Technician (HT) during a tour of the laboratory at 1:05 p. m. on 1/6/21. 2. A slide exchange with an Anatomic Pathologist (AP) was required twice annually as established in the Monthly Quality Assurance Meeting Minutes Form and the Mohs Micrographic Surgery Frozen Section Laboratory Case Review Request Form, both located in the Mohs Lab Policies and Procedures Manual. 3. Twice annual accuracy verification of Mohs testing performed was not found for 2019 and 2020 during review of laboratory records. The laboratory was unable to provide the missing Mohs accuracy verification documentation upon request on the day of the survey. The laboratory was given 7 days to locate and forward the required documentation. 4. The laboratory performed approximately 475 Mohs micrographic surgery procedures annually as indicated in laboratory records and listed on Form CMS-116 Clinical Laboratory Improvement Amendments (CLIA) Application for Certification provided by the laboratory on date of survey. 5. In an interview at 2:00 p. m. on 1/6/21, the HT confirmed the above findings. By the deadline of 1/13/2021, the laboratory failed to locate and forward the required documentation. .</p>