

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 24D2061348	(X3) Date Survey Completed 06/28/2023
Name of Provider or Supplier North Metro Dermatology	Street Address, City, State 400 Village Center Dr #200, North Oaks, 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:</p> <p>. Based on document review and interview with laboratory personnel, the laboratory failed to verify the accuracy of the single Histopathology test performed in the laboratory at least twice annually in 2021. In addition, the laboratory failed to verify the accuracy of one of two Microbiology microscopic examinations at least twice annually in 2022. Findings are as follows: A. Histopathology 1. The laboratory performed Mohs micrographic surgery under the specialty of Histopathology as confirmed by the Practice Manager (PM) during a tour of the laboratory at 10:20 a.m. on 06/28/23. 2. Mohs case slide evaluation by an outside provider was required twice annually as established in the Protocol for Proficiency Testing for Mohs Surgery found in the Mohs Micrographic Surgery Procedure Manual. 3. One Mohs case was evaluated on 07/20/21. A second Mohs case evaluation was not found in 2021 laboratory records. The laboratory was unable to provide a second 2021 Mohs case evaluation upon request. 4. The laboratory performed 176 Mohs micrographic surgery procedures in 2021 as indicated in the laboratory's Mohs patient log. 5. In an interview at 11:50 a.m. on 06/28/23, the PM confirmed the above finding. B. Microbiology Microscopic Examinations 1. The laboratory performed microscopic examinations for fungus and parasites under the specialty of Microbiology as confirmed by the Practice Manager (PM) during a tour of the laboratory at 10:20 a.m. on 06/28/23. 2. Scabies parasite preparation accuracy verification via peer review was required twice annually as established in the Scabies Prep Protocol found in the Provider Performed Microscopic Procedures & CLIA Waived/Non-Waived Tests Procedure Manual. 3. Documentation of twice annual Scabies preparation accuracy verification was not found during review of 2022 laboratory records. The laboratory</p>

was unable to provide 2022 Scabies preparation accuracy verification documentation upon request. 4. The laboratory performed two Scabies preparation microscopic examinations in 2022 as indicated in the laboratory's Point of Care Scabies Work Sheet testing log. 5. In an interview at 12:55 p.m. on 06/28/23, the PM confirmed the above finding.