

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 29D1096978	(X3) Date Survey Completed 03/21/2019
Name of Provider or Supplier Las Vegas Dermatology And Skin Cancer	Street Address, City, State 5731 S Fort Apache Road, Ste 130, Las Vegas, NV	
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
D0000	This Statement of Deficiencies was created as a result of an on-site CLIA recertification survey conducted at your facility on March 21, 2019. The findings and conclusions of any investigation by the Division of Public and Behavioral Health shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.
D5203	<p>SPECIMEN IDENTIFICATION AND INTEGRITY CFR(s): 493.1232</p> <p>The laboratory must establish and follow written policies and procedures that ensure positive identification and optimum integrity of a patient's specimen from the time of collection or receipt of the specimen through completion of testing and reporting of results.</p> <p>This STANDARD is not met as evidenced by: Based on a random audit of eight patients from 4/06/17 through 2/04/19 and an interview with the office manager, the laboratory failed to follow the policies and procedures to ensure positive identification of a patient specimen from the time of collection through the completion of testing and the reporting of the results. Findings include: 1. The laboratory failed to ensure the correct site of a patient specimen collection and Mohs procedure for one of eight random patient audits between 4/06/17 through 2/04/19. 2. A patient who had a biopsy specimen collected on 12/15/16 and had a Mohs procedure performed on 4/06/17 revealed the patient site of specimen location for the following reports: -Reference laboratory dermatopathology biopsy report: Left Lateral Neck -The request for the Mohs procedure: Left Lateral Neck -The laboratory Mohs surgery log: Left Lateral Neck -The Mohs map: Right Lateral Neck -The Mohs slides: Right Lateral Neck -The Mohs final surgical report: Right</p>

Lateral Neck This was confirmed by the laboratory office manager on March 21, 2019 at approximately 11:00 AM. The laboratory performs approximately 1,000 histopathology patient tests annually.

D5303

TEST REQUEST
CFR(s): 493.1241(b)

The laboratory may accept oral requests for laboratory tests if it solicits a written or electronic authorization within 30 days of the oral request and maintains the authorization or documentation of its efforts to obtain the authorization.

This STANDARD is not met as evidenced by:
Based on a random audit of eight patients from 4/06/17 through 2/04/19 and an interview with the office manager, the laboratory failed to ensure that all oral requests for laboratory tests are followed with written documentation of the providers request within 30 days. Findings include: A random audit of eight patients between 4/06/17 through 2/04/19 found the laboratory failed to ensure written documentation of an oral request for a Mohs procedure to be performed on a patient on 2/04/19. This was confirmed by the laboratory office manager on March 21, 2019 at approximately 11:00 AM. The laboratory performs approximately 1,000 histopathology patient tests annually.