

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 29D1105764	(X3) Date Survey Completed 07/17/2019
Name of Provider or Supplier Vivida Dermatology-Sunset	Street Address, City, State 6460 Medical Center St Ste 350, 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 July 17, 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.
D5785	<p>CORRECTIVE ACTIONS CFR(s): 493.1282(b)(3)</p> <p>(b) The laboratory must document all corrective actions taken, including actions taken when any of the following occur: (b)(3) The criteria for proper storage of reagents and specimens, as specified under 493.1252(b), are not met.</p> <p>This STANDARD is not met as evidenced by: Based on a review of temperature recording records for the storage of laboratory supplies from 7/17/17 through 7/17/19 and an interview with the laboratory manager, the laboratory failed to take and document corrective action when the criteria for the proper storage of laboratory supplies are found to be outside of the acceptable range established by the laboratory. Findings include: 1. The laboratory failed to have the correct acceptable range established for the storage of refrigerated laboratory supplies to comply with the manufacturer's requirement for storage. 2. The manufacturer's requirements for the storage of refrigerated laboratory supplies states that the acceptable range is 2 to 8 degrees Centigrade (C) or 36 to 46 degrees Fahrenheit (F). The laboratory established a refrigerated acceptable range of 32 to 40 degrees F. 3. The laboratory was found to be outside of their refrigerator acceptable range of 32 to 40 degrees F 15 times in March 2019, 22 times in April 2019, 23 times in May 2019, 16 times in June 2019 and 12 times in July 2019 with no corrective action taken. The</p>

laboratory performs approximately 3,265 Mycology, Parasitology and Histopathology tests annually. This was confirmed by the laboratory manager on July 17, 2019 at approximately 3:30 PM.

D5805

TEST REPORT
CFR(s): 493.1291(c)

The test report must indicate the following: (c)(1) For positive patient identification, either the patient's name and identification number, or a unique patient identifier and identification number. (c)(2) The name and address of the laboratory location where the test was performed. (c)(3) The test report date. (c)(4) The test performed. (c)(5) Specimen source, when appropriate. (c)(6) The test result and, if applicable, the units of measurement or interpretation, or both. (c)(7) Any information regarding the condition and disposition of specimens that do not meet the laboratory's criteria for acceptability.

This STANDARD is not met as evidenced by:
Based on a random audit of patient test records from 7/17/17 through 6/26/19 and an interview with the laboratory manager, the laboratory failed to have the correct name of the laboratory in which the laboratory test was performed on the patient final test report. Findings include: 1. The laboratory failed to have the correct name of the laboratory in which patient testing was performed on the final patient test report. 2. A random audit of patient final test reports from 7/17/17 through 6/26/19 revealed that four of ten patient test records had the name Vivida Dermatology on the report when the name of the laboratory is Surgical Dermatology and Laser Center. The laboratory performs approximately 3,265 Mycology, Parasitology and Histopathology tests annually. This was confirmed by the laboratory manager on July 17, 2019 at approximately 3:30 PM.