

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 31D0685177	(X3) Date Survey Completed 07/17/2018
Name of Provider or Supplier Affiliated Dermatologists &	Street Address, City, State 182 South Street, Morristown, NJ	
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
D5209	<p>PERSONNEL COMPETENCY ASSESSMENT POLICIES CFR(s): 493.1235</p> <p>As specified in the personnel requirements in subpart M, the laboratory must establish and follow written policies and procedures to assess employee and, if applicable, consultant competency.</p> <p>This STANDARD is not met as evidenced by: Based on surveyor review of the Competency Assessment (CA) records and interview with the Testing Personnel (TP), the laboratory failed to use the applicable elements to assess Mohs testing on four of four TP in the calendar year 2017. The TP #1 listed on the CMS form 209 confirmed on 7/17/18 at 1:35 pm the applicable elements were not used to assess CA.</p>