Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 31D1041974	(X3) Date Survey Completed 03/01/2023
Name of Provider or Supplier Princeton Dermatology Associates	**Street Address, City, State** 208 Bunn Drive, Princeton, 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
D5417	TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(d) Reagents, solutions, culture media, control materials, calibration materials, and other supplies must not be used when they have exceeded their expiration date, have deteriorated, or are of substandard quality. This STANDARD is not met as evidenced by: Based on surveyor observation of Histology reagents and interview with the Testing Personnel (TP), the laboratory failed to discard expired Histopathology reagent from 10/16/19 to the date of survey. The finding include: 1. Gill 3 Hematoxylin reagent expired 11/30/22. 2. Eosin Working Solution reagent expired 10/16/19. 3. Approximately 300 patients were tested with expired reagent. 4. The TP confirmed on 3/1/23 at 12:30 pm that the laboratory used expired reagents.
D5803	TEST REPORT CFR(s): 493.1291(b) Test report information maintained as part of the patient's chart or medical record must be readily available to the laboratory and to CMS or a CMS agent upon request. This STANDARD is not met as evidenced by: Based on the surveyor review of the Test Reports (TR) and interview with the Testing Personnel (TP), the laboratory failed to have one out of five TR available to review from 8/12/22 to the date of the survey. The TP confirmed on 3/1/23 at 1:00 pm not all patient TR were available to review.