

| | | |
|--|--|---|
| Statement of Deficiencies | (X1) Provider/Supplier/CLIA Identification Number 31D2023248 | (X3) Date Survey Completed 03/09/2021 |
| Name of Provider or Supplier Cosmetic And Dermatologic | Street Address, City, State 719 N Beers St, Holmdel, 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 | <p>TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(d)</p> <p>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.</p> <p>This STANDARD is not met as evidenced by: Based on surveyor observation of Mohs reagents and interview with the Office Manager (OM), the laboratory failed to discard an expired Mohs reagent from 1/15/2020 to the date of survey. The findings include: 1. On the date of the survey the laboratory had an expired reagent as follows: Platinum Line Eosin Y Stain Solution, 1 % (w/v) in Alcohol. Lot number 1901114, Expiration 1/15/2021 2. Approximately 40 patients were tested with the expired reagent. 3. The OM confirmed on 3/9/2021 at 10:00 am that the laboratory used an expired reagent.</p> |