

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 31D2024863	(X3) Date Survey Completed 12/02/2021
Name of Provider or Supplier Dermatology And Skin Surgery Center, Pa	Street Address, City, State 3322 Route 22 West, Branchburg, 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
D5413	TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(b) The laboratory must define criteria for those conditions that are essential for proper storage of reagents and specimens, accurate and reliable test system operation, and test result reporting. The criteria must be consistent with the manufacturer's instructions, if provided. These conditions must be monitored and documented and, if applicable, include the following: (1) Water quality. (2) Temperature. (3) Humidity. (4) Protection of equipment and instruments from fluctuations and interruptions in electrical current that adversely affect patient test results and test reports. This STANDARD is not met as evidenced by: Based on surveyor review of the lack of Temperature Records (TR) and interview with the Testing Personnel (TP), the laboratory failed to document Room Temperature (RT) where Histopathology test reagents were stored and tests were performed from 2 /21/19 to the date of the survey. The findings include: 1. There were no temperatures recorded. 2. The TP # 1 as listed on CMS form 209 confirmed on 12/2/21 at 12:00 pm that the laboratory failed to accurately record RT.