

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 31D2047361	(X3) Date Survey Completed 12/12/2023
Name of Provider or Supplier Integrated Dermatology Of Nj Llc	Street Address, City, State 385 Route 18, East Brunswick, 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
D5217	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1)</p> <p>At least twice annually, the laboratory must verify the accuracy of any test or procedure it performs that is not included in subpart I of this part.</p> <p>This STANDARD is not met as evidenced by: Based on surveyor review of the Biannual Assessment (BA) records and interview with the Mohs Technician, the laboratory failed to verify the accuracy and reliability of Mohs testing twice annually from 10/04/21 to the date of the survey. The findings include: 1. There was no documented evidence a Biannual Assessment for Histopathology tests was performed in the calendar years of 2022 and 2023. 2. The Mohs Technician confirmed on 12/12/23 at 3:30 pm that the laboratory failed to verify the accuracy and reliability of Mohs testing.</p>