

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 32D0535227	<b>(X3) Date Survey Completed</b> 11/14/2023
<b>Name of Provider or Supplier</b> New Mexico Dermatology Associates	<b>Street Address, City, State</b> 7520 Montgomery Blvd Ne, D5, Albuquerque, NM	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D0000</b>	A recertification survey was performed 11/14/2023. The laboratory was found to be in compliance with the CLIA regulations found at 42 CFR, with one standard-level deficiency cited.
<b>D6094</b>	<p><b>LABORATORY DIRECTOR RESPONSIBILITIES</b> CFR(s): 493.1445(e)(5)</p> <p>The laboratory director must ensure that the quality assessment programs are established and maintained to assure the quality of laboratory services provided and to identify failures in quality as they occur.</p> <p>This STANDARD is not met as evidenced by: Based on review of laboratory records and confirmed in staff interview, the laboratory director failed to establish a quality assessment program to ensure the quality of laboratory services provided. Findings included: 1. The laboratory was asked to provide documentation indicating a quality assessment program has been established. No documentation was provided. 2. In an interview on 11/14/2023 at 10:20 am, the Laboratory Director was asked to provide policies and procedures related to the laboratory's quality assessment program. None were provided. This confirmed the findings.</p>