Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	32D0933526	01/11/2018
Name of Provider or Supplier	**Street Address, City, State**	
Epiphany Dermatology Of New Mexico Llc	141 N Roadrunner Pkwy Ste 228, Las Cruces, NM	

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
D0000	The following deficiencies were cited during a recrtification survey completed on 1/11 /2018 for the federal requirements of 42 CFR Part 493 for Laboratories.
D5473	CONTROL PROCEDURES CFR(s): 493.1256(e)(2)(g) (e) For reagent, media, and supply checks, the laboratory must do the following: (e) (2) Each day of use (unless otherwise specified in this subpart), test staining materials for intended reactivity to ensure predictable staining characteristics. Control materials for both positive and negative reactivity must be included, as appropriate. (g) The laboratory must document all control procedures performed. This STANDARD is not met as evidenced by: Based on the lack of documentation, review of patient logs, patient reports, change of ownership documents and interview with the laboratory director, the laboratory failed to document the quality of the Hematoxylin and Eosin (H&E) stain for each batch of slides since April 14, 2017. The laboratory reported reading 1,383 H & E slides April 14, 2017- December 31, 2017. Findings are: Repeat deficiency from survey on 2/17 /2016. 1. Review of the electronic pathology log and associated patient medical records revealed that there was no documentation of stain quality either in the pathology log or in each patient test report. 2. Review of the laboratory's quality assurance records revealed no documentation of stain quality assessment or special stain quality control from the H & E processing laboratory. 3. According to the change of ownership documentation, the laboratory underwent a change of ownership effective April 14 2017. During interview on 1/08/2018 at 4:00 pm, the laboratory director stated he had been documenting the stain quality on each patient report since the last survey on 2/17/2016 until the implementation of a new electronic medical record system (EMR) by the new owner. He further stated the new EMR did not allow him to enter this information into each patient report. The laboratory director confirmed that he did not document the stain quality elsewhere in the laboratory.