

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 32D2122507	<b>(X3) Date Survey Completed</b> 12/13/2023
<b>Name of Provider or Supplier</b> Desert Mountain Skin Cancer Surgery	<b>Street Address, City, State</b> 2019 Galisteo Street, Suite N9b, Santa Fe, 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>	An onsite recertification survey conducted on December 13, 2023 , at Desert Mountain Skin Cancer Surgery found the laboratory to be in compliance with the CLIA regulations found at 42 CFR, Part 493 Laboratory Requirements, with standard deficiencies cited.
<b>D5217</b>	<p><b>EVALUATION OF PROFICIENCY TESTING PERFORMANCE</b> 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 review of Proficiency Testing Procedure, Proficiency Testing Forms, and staff interview, the laboratory failed to verify the accuracy of non-regulated analytes for 1 of 2 events in 2023. Findings Included: 1. A review of Proficiency Testing Procedure states lab tech or risk manager is to send two cases semi-annually for peer review. 2. A review of Proficiency Testing forms revealed only one peer review was done for 2023. 3. Laboratory director was asked to provide documentation for second peer review. None were provided. 4. Interview on 12/13/2023 at 12:22 pm with laboratory director confirmed the findings.</p>
<b>D5417</b>	<p><b>TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT</b> 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:</p>

Based on direct observation, manufacturer's instructions and staff interview, the laboratory failed to ensure Hematoxylin reagent was not used for testing beyond expiration dates for 3 of 3 reagents. Findings included: 1. During a tour of the laboratory on 12/13/2023 at 1:30 PM the following expired reagents were observed:  
A. 3 Bottles of Avantik Gil 3 Hematoxylin, Lot Number: 141098, Exp: 2023-07-31.  
B. One bottle was opened and labeled in use 12-13-23. 2. Interview on 12/13/2023 at 1:40 PM with laboratory director confirmed the findings.