

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 33D2032764	(X3) Date Survey Completed 02/13/2020
Name of Provider or Supplier Michael Paltiel Md Pc	Street Address, City, State 64-05 Yellowstone Blvd, Cfu 101, Forest Hills, NY	
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
D5415	<p>TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(c)</p> <p>Reagents, solutions, culture media, control materials, calibration materials, and other supplies, as appropriate, must be labeled to indicate the following: (1) Identity and when significant, titer, strength or concentration. (2) Storage requirements. (3) Preparation and expiration dates. (4) Other pertinent information required for proper use.</p> <p>This STANDARD is not met as evidenced by: Based on surveyor's observation of the Mohs' slide containers, review of the Mohs' staining procedure, the laboratory failed to label the staining containers. FINDINGS: 1. The surveyor observed the 12 Mohs' slide containers on February 13, 2020 at approximately 10:00 AM, the laboratory failed to label the 12 staining containers used in the Mohs staining process for their content and expiration date. a. The laboratory uses Hematoxylin and Eosin (H &E) stain to differentiate between the nuclear and cytoplasmic parts of a cell. 2. The staining containers were unlabeled, therefore, the surveyor could not determine which containers had the reagents, alcohols an other pertinent materials used in the staining process.</p>