

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 36D2062681	(X3) Date Survey Completed 10/01/2018
Name of Provider or Supplier Dermatologists Of Southwest Ohio	Street Address, City, State 1933 Ohio Drive, Grove City, OH	
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
D3031	<p>RETENTION REQUIREMENTS CFR(s): 493.1105(a)(3)</p> <p>Analytic systems records. Retain quality control and patient test records (including instrument printouts, if applicable) and records documenting all analytic systems activities specified in 493.1252 through 493.1289 for at least 2 years.</p> <p>This STANDARD is not met as evidenced by: Based on record review and an interview with the Office Manager, the laboratory failed to retain quality control records for at least 2 years. All patients tested at this laboratory have the potential to be affected. Findings include: 1. Review of quality control records for 2017-2018 found no quality control documentation prior to January 2018. 2. An interview with the Office Manager, on 10/1/18 at 10:12 am, confirmed that quality control records prior to January 2018 could not be produced.</p>
D3037	<p>RETENTION REQUIREMENTS CFR(s): 493.1105(a)(4)</p> <p>Proficiency testing records. Retain all proficiency testing records for at least 2 years.</p> <p>This STANDARD is not met as evidenced by: Based on record review and an interview with the Office Manager, the laboratory failed to retain MOHs proficiency testing records for at least 2 years. All patients tested at this laboratory have the potential to be affected. Findings include: 1. Review of MOHs proficiency testing records for 2017-2018 found no MOHs proficiency testing documentation prior to January 2018. 2. An interview with the Office Manager, on 10/1/18 at 10:12 am, confirmed that MOHs proficiency testing documentation prior to January 2018 could not be produced.</p>