

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 36D2113498	(X3) Date Survey Completed 11/19/2025
Name of Provider or Supplier Northeast Dermatology	Street Address, City, State 2100 Marble Cliff Office Park, Ste B, Columbus, 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
D6054	<p>TECHNICAL CONSULTANT RESPONSIBILITIES CFR(s): 493.1413(b)(9)</p> <p>(b)(9) Thereafter, evaluations must be performed at least annually</p> <p>This STANDARD is not met as evidenced by: Based on record review and an interview with the Technical Supervisor (TS), the Technical Consultant (TC) failed to evaluate and document the competency, ensuring competency was maintained in order to perform moderately complex testing to report the test results promptly, accurately, and proficiently. This deficient practice had the potential to affect one out of one patient tests conducted by TP#5 in the subspecialty of Mycology on 12/19/2024. Findings Include: 1. Review of the laboratory's policy and procedure titled, "Competency Assessments for KOH Preparation" without an approval via signature and date by the Laboratory Director found the following statement: "Direct Observation: A supervisor (Lab director or competent provider, able to assess the competency for others) will directly observe the technician performing the KOH prep, ensuring they follow all procedural steps correctly, including specimen handling and preparation." 2. Review of the laboratory's Form CMS-209, approved via signature and date by the Laboratory Director on 11/03/2025, revealed one individual listed and credentialed by the Laboratory Director as a TC and six individuals listed and credentialed by the Laboratory Director as moderate complexity TP. 3. Review of the laboratory's competency assessment documentation provided on the date of the inspection did not find a 2024 competency assessment for TP #5, however, a competency assessment completed at another location for TP #5 was provided. 4. The Inspector requested the laboratory's 2024 competency assessment documentation completed at this location for TP#5 from the TS. The TS was unable to provide a competency assessment completed at this location. The interview occurred on 11/19/2025 at 10:45 AM.</p>