

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 38D0625501	(X3) Date Survey Completed 11/19/2018
Name of Provider or Supplier Valley View Dermatology	Street Address, City, State 2441 Grear St Ne, Salem, OR	
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
D5449	<p>CONTROL PROCEDURES CFR(s): 493.1256(d)(3)(ii)(g)</p> <p>Unless CMS Approves a procedure, specified in Appendix C of the State Operations Manual (CMS Pub. 7), that provides equivalent quality testing, the laboratory must-- At least once a day patient specimens are assayed or examined perform the following for-- Each qualitative procedure, include a negative and positive control material; (g) The laboratory must document all control procedures performed.</p> <p>This STANDARD is not met as evidenced by: Based on review of records and interview with the lead Laboratory Technician 11/19 /2018 at approximately 12:00, the laboratory failed to perform Quality Control (QC) on their Tzanck slide procedure. Findings include: 1. There was no documentation of QC being performed on the Tzanck stain used on patient specimens. 2. The lead Laboratory Technician confirmed that no QC is done on the Tzanck stain.</p>