Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	39D0696343	08/06/2026
Name of Provider or Supplier	**Street Address, City, State**	
Jefferson Dermatology Associates	33 S 9th Street, Suite 740, Philadelphia, PA	

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
D5217	EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1) 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. This STANDARD is not met as evidenced by: Based on record review, lack of documentation, and interview with the Histotechnologist (HT), the laboratory failed to ensure the verification of accuracy for histopathology examinations was performed at least twice annually, as required for tests not included in subpart I, for 12 of 12 months in 2025. Findings include: 1. On the day of the survey, 08/06/2026 at 10:00 am, the laboratory could not provide documentation for the verification of accuracy of histopathology examinations performed twice annually for 12 of 12 months in 2025. 2. The laboratory performed 1085 histopathology examinations in 2025 (CMS 116 estimated annual volume, dated 08/06/2026). 3. The HT confirmed the findings above on 08/06/2026 at 12:05 pm.
D5435	MAINTENANCE AND FUNCTION CHECKS CFR(s): 493.1254(b)(2) (b)(2)(i) Define a function check protocol that ensures equipment, instrument, and test system performance that is necessary for accurate and reliable test results and test result reporting. (b)(2)(ii) Perform and document the function checks, including background or baseline checks, specified in paragraph (b)(2)(i) of this section. Function checks must be within the laboratory's established limits before patient testing is conducted. This STANDARD is not met as evidenced by: Based on observation of the laboratory, lack of documentation, and interview with the

	Histotechnologist (HT), the laboratory failed to establish a function check protocol for 1 of 1 hygrometer/thermometer used to monitor humidity conditions in the laboratory when histopathology examinations were performed from 01/16/2025 to 08/06/2026. Findings include: 1. On the day of the survey, 08/06/2026 at 11:45 am, observation of the laboratory revealed 1 of 1 hygrometer/thermometer used to monitor humidity of the laboratory had no expiration date, serial number or identifying label on the equipment. 2. The laboratory failed to provide a policy for the performance of function checks to ensure 1 of 1 hygrometer/thermometer used to monitor humidity provided accurate temperature readings to ensure the cryostat's operating conditions were met when histopathology examinations were performed from 01/16/2025 to 08 /06/2026. 3. The laboratory performed 1085 histopathology examinations in 2025 (CMS 116 estimated annual volume, dated 08/06/2026). 4. The HT confirmed the above findings on 08/06/2026 at 12:00 pm.