

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 39D0915347	(X3) Date Survey Completed 08/18/2026
Name of Provider or Supplier Dermatology Ltd	Street Address, City, State 101 Chesley Dr Ste 100 Georgetown Bldg, Media, 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
D6107	LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(15) (e)(15) Specify, in writing, the responsibilities and duties of each consultant and each supervisor, as well as each person engaged in the performance of the preanalytic, analytic, and postanalytic phases of testing, that identifies which examinations and procedures each individual is authorized to perform, whether supervision is required for specimen processing, test performance or result reporting and whether supervisory or director review is required prior to reporting patient test results. This STANDARD is not met as evidenced by: Based on lack of documentation and interview with the Histotechnician (HT) the Laboratory Director (LD) failed to specify in writing the job responsibilities for 5 of 5 laboratory positions involved in the pre-analytic, analytic, and post-analytic phases of high complexity testing (histopathology) performed from 10/22/2024 to 08/18/2026. Findings include: 1. On the day of survey, 08/18/2026, the laboratory failed to provide documentation of the job responsibilities written by the LD for the following 5 of 5 laboratory positions involved in the pre-analytic, analytic, and post-analytic phases of dermatopathology microscopic examinations performed from 10/22/2024 to 08/18/2026: - Laboratory Director (LD) - Clinical Consultant (CC) -Technical Supervisor (TS) -General Supervisor (GS) -Testing Personnel (TP) 2. The HT confirmed the above findings on 08/18/2026 at 11:30 am.
D6125	TECHNICAL SUPERVISOR RESPONSIBILITIES CFR(s): 493.1451(b)(8)(v) (b)(8)(v) Assessment of test performance through testing previously analyzed specimens, internal blind testing samples or external proficiency testing samples; and

This STANDARD is not met as evidenced by:

Based on review of competency assessment (CA) records and interview with the Histotechnician (HT), the Technical Supervisor (TS) failed to assess the competency for 2 of 3 testing personnel (TP) through testing previously analyzed specimens, internal blind testing, or external proficiency testing samples for dermatopathology microscopic examinations performed from 10/22/2024 to 08/18/2026. Findings include: 1. On the day of survey, 08/18/2026 at 10:30 am, review of laboratory CA records revealed the TS did not include the assessment of test performance through previously analyzed specimens, internal blind testing samples or external proficiency testing samples for 2 of 3 TP (CMS 209 personnel #9 and 10, dated 8/18/2026) that performed dermatopathology microscopic examinations from 10/22/2024 to 08/18/2026. 2. . The laboratory performed 15,219 dermatopathology microscopic examinations in 2025 (CMS 116 estimated annual volume, dated 08/18/2026). 3. The HT confirmed the findings above on 08/18/2026 around 11:00 am.