

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 39D0931167	(X3) Date Survey Completed 05/25/2023
Name of Provider or Supplier Lancaster Skin Center Pc	Street Address, City, State 190 North Pointe Boulevard, Lancaster, 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	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1)</p> <p>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.</p> <p>This STANDARD is not met as evidenced by: Based on the review of the laboratory's procedure manual, peer review records, and interview with the Laboratory Director (LD), the laboratory failed to verify the accuracy of the microscopic examinations for histopathology (Mohs Surgery), at least twice annually as required for tests not included in subpart I in 2022. Findings include: 1. The laboratory's Proficiency Testing Policy (Item #6.1.1) stated that "Mohs slides are reviewed every 6 months (at least 3 cases)." 2. On the day of survey, 05/25/2023 at 10:46 am, review of Mohs surgery peer review records revealed that evaluation and verification activity was performed for the microscopic examinations for histopathology (Mohs Surgery) once in 2022. 3. The laboratory performed 276 microscopic examinations for histopathology (Mohs Surgery) in 2022. 4. The LD confirmed the findings above on 05/25/2023 around 12:00 pm.</p>