

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 39D2015702	(X3) Date Survey Completed 07/21/2026
Name of Provider or Supplier Abington Dermatology Assoc	Street Address, City, State 1190 Old York Rd, Warminster, 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
D5209	PERSONNEL COMPETENCY ASSESSMENT POLICIES CFR(s): 493.1235 As specified in the personnel requirements in subpart M, the laboratory must establish and follow written policies and procedures to assess employee and, if applicable, consultant competency. This STANDARD is not met as evidenced by: Based on lack of documentation and interview with the Mohs Histotech (MH), the laboratory failed to establish and follow a competency assessment (CA) procedure to assess the competency of 1 of 1 Technical Supervisor (TS) and 1 of 1 General Supervisor(GS) for their supervisory responsibilities performed from 1/23/2025 to 7/21/2026. Findings Include: 1. On the day of survey, 7/21/2026 at 10:05 am, the laboratory failed to provide a competency assessment procedure to assess the competency of 1 of 1 TS and 1 of 1 GS (CMS 209, TS #1 and GS #1 dated 7/21/2026), for their supervisory responsibilities performed in the laboratory from 1/23/2025 to 7/21/2026. 2. The laboratory failed to provide CA records for TS #1 and GS #1 for their supervisory responsibilities performed from 1/23/2025 to 7/21/2026. 3. The laboratory performed 1,150 Mohs examinations in 2025 (CMS 116 estimated annual volume, dated 07/09/2026) 4. The MH confirmed the findings above on 7/21/2026 at 10:15 am.