

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 39D2039545	(X3) Date Survey Completed 05/07/2026
Name of Provider or Supplier Pennsylvania Dermatology Partners, Inc	Street Address, City, State 2128 Penn Ave, 1st Floor, West Lawn, 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
D5401	<p>PROCEDURE MANUAL CFR(s): 493.1251(a)</p> <p>(a) A written procedures manual for all tests, assays, and examinations performed by the laboratory must be available to, and followed by, laboratory personnel. Textbooks may supplement but not replace the laboratory's written procedures for testing or examining specimens.</p> <p>This STANDARD is not met as evidenced by: Based on policy review, lack of documentation, and interview with the Senior Director of Clinical Development (SDCD), the laboratory director (LD) failed to perform and document the required yearly procedure review as specified on the laboratory's Policies and Procedure manual for 2 of 2 years from 04/10/2024 to 05/07/2026. Findings include: 1. On the day of the survey, 05/07/2026 at 1:05 p.m., review of the laboratory's policy manual revealed the LD signature page for policy approval indicated the following: -"The above policies and procedures have been reviewed and are effective as of open date. Updated as procedures change. Reviewed yearly." 2. The LD failed to provide documentation for the yearly policy review performed for 2 of 2 years from 04/10/2024 to 05/07/2026. 3. The laboratory performed 2,950 histopathology slide examinations (Mohs) in 2025 (CMS 116, estimated annual volume, dated 05/07/2026). 4. The SDCD confirmed the findings on 05/07/2026 at 1:40 p.m.</p>