Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	39D2046334	08/17/2018
Name of Provider or Supplier	**Street Address, City, State**	
Meadville Dermatology & Skin Surgery Institute	149 North Main Street, Meadville, 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
D6092	LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(4)(iv) The laboratory director must ensure an approved corrective action plan is followed when any proficiency testing result is found to be unacceptable or unsatisfactory. This STANDARD is not met as evidenced by: Based on College of Americaqn Pathologists Fungal Smear Proficiency testing record review and interview with Laboratory Director on (08/17/2018) the date of survey, the Laboratory Director failed to ensure an approved corrective action plan was followed, to prevent recurrence of the mycology 2018 proficiency testing failure (Event 1). Findings include: 1. From 2017 through 2018, 1 of 3 College of Americaqn Pathologists Fungal Smear Events reviewed was unacceptable on the date of the survey (08/17/2018) : 2. 2018 College of Americaqn Pathologists Fungal Smear Event 1 FSM-01 Score Good FSM-02 Score Unacceptable FSM-03 Score Unacceptable 3. Corrective action was not documented for 2018 College of Americaqn Pathologists Fungal Smear Event 1. 4. During the survey, the Laboratory Director confirmed the above findings.