

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  39D2082546	<b>(X3) Date Survey Completed</b>  11/08/2022
<b>Name of Provider or Supplier</b>  Nj Cd DbA Dedicated Dermatology	<b>Street Address, City, State</b>  2895 Hamilton Blvd Suite 202, Allentown, PA	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D5293</b>	<p><b>GENERAL LABORATORY SYSTEMS QUALITY ASSESSMENT</b> CFR(s): 493.1239(b)(c)</p> <p>(b) The general laboratory systems quality assessment must include a review of the effectiveness of corrective actions taken to resolve problems, revision of policies and procedures necessary to prevent recurrence of problems, and discussion of general laboratory systems quality assessment reviews with appropriate staff. (c) The laboratory must document all general laboratory systems quality assessment activities.</p> <p>This STANDARD is not met as evidenced by: Based on a review of the laboratory Quality Assurance procedure, lack of quality assessment (QA) records, and interview with the Laboratory Supervisor (LS), the laboratory failed to document all general laboratory systems QA activities from 10/28/2020 to 11/08/2022. Findings Include: 1. On the day of the survey, 11/08/2022 at 1:26 PM, a review of the laboratory quality assurance procedure revealed that a QA checklist was supposed to be reviewed and signed off by the Laboratory Director periodically at least annually. 2. The laboratory failed to review, sign, and document all general laboratory systems quality assessment activities from 10/28/2020 to 11/08/2022. 3. The LS confirmed the above findings on 11/08/2022 at 2:25 PM.</p>