Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number** 39D2087795	**(X3) Date Survey Completed** 04/26/2023
Name of Provider or Supplier Philadelphia Center For Dermatology	**Street Address, City, State** 361 Highland Ave, Suite 204, Jenkintown, 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	EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1) 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. This STANDARD is not met as evidenced by: Based on review of laboratory procedures, Potassium Hydroxide (KOH) Control and Assessment Form, Proficiency Testing (PT) records and interview with the Laboratory Director (LD) and Practice manager (PM), the laboratory failed to verify the accuracy of KOH and Scabies microscopic examinations at least twice annually in 2021 and 2022. Findings Include: 1) On the day of the survey, 04/26/2023 at 12: 39pm, the laboratory could not provide more than one PT record for KOH and Scabies microscopic examinations in 2021 and 2022. 2) Interview with the PM revealed the PT was performed through peer review and he was under the impression that PT only needed to be completed twice during the first year of testing and then yearly after that. 3) The laboratory's procedure states that proficiency testing for KOH and Scabies is performed once a year. 4) The LD and PM confirmed the above findings on 04/26/2023 around 12:45pm.
D5413	TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(b) The laboratory must define criteria for those conditions that are essential for proper storage of reagents and specimens, accurate and reliable test system operation, and test result reporting. The criteria must be consistent with the manufacturer's instructions, if provided. These conditions must be monitored and documented and, if applicable, include the following: (1) Water quality. (2) Temperature. (3) Humidity. (4) Protection of equipment and instruments from fluctuations and interruptions in electrical current that adversely affect patient test results and test reports.

	This STANDARD is not met as evidenced by: Based on review of Histology Room Temperature & Humidity records and interview with the Laboratory Director (LD), the lab failed to document room temperature and humidity in histology for 9 of 12 months in 2021. Findings Include: 1) On the day of the survey 04/26/2023 at 1:55pm, review of the 2021 Histology Room Temperature and Humidity Log revealed no temperature or humidity readings were recorded from April 18, 2021 through December 31st, 2021. 2) The LD confirmed finding above on 04/26/2023 around 2:00pm.