

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 39D2120730	(X3) Date Survey Completed 03/05/2024
Name of Provider or Supplier Forefront Dermatology, Sc	Street Address, City, State 5750 Centre Ave, Suite 500, Pittsburgh, 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
D5429	<p>MAINTENANCE AND FUNCTION CHECKS CFR(s): 493.1254(a)(1)</p> <p>For unmodified manufacturer's equipment, instruments, or test systems, the laboratory must perform and document maintenance as defined by the manufacturer and with at least the frequency specified by the manufacturer.</p> <p>This STANDARD is not met as evidenced by: Based on observation of the laboratory, lack of documentation, and interview with the Regional Clinic Manager (RCM), the laboratory failed to perform and document the maintenance/ function checks for 2 of 2 microscopes used for histopathology, mycology, and parasitology microscopic examinations performed in 2023. Findings Include: 1. Step #8 of the laboratory's policy "M-721-E-ii Microscope Quality Control Policies and Documentation" states " Microscope maintenance annually." 2. On the day of survey, 03/05/2024 at 01:38 pm, the laboratory failed to provide the maintenance/function check records for the following 2 of 2 microscopes used for histopathology, mycology, and parasitology microscopic examinations performed in 2023: - Olympus BX46 Manufacturer #2B47592. - Olympus LHB Manufacturer #428974. 3. The laboratory reported an annual volume of 657 in histopathology, and 238 in microbiology. (CMS 116) 4. The above findings were confirmed by the RCM on 03/05/2024 at 1:38 pm.</p>