

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 39D2134697	(X3) Date Survey Completed 03/01/2023
Name of Provider or Supplier Advanced Dermatology Of Pa	Street Address, City, State 608 Ederer Lane, Ambler, 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	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1)</p> <p>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.</p> <p>This STANDARD is not met as evidenced by: Based on review of peer review records and interview with the Laboratory Director (LD), the Laboratory failed to ensure that verification of accuracy of the histopathology slides was performed twice annually for 2 of 2 years, from 2021 to 2022 as required. Findings Include: 1. On the day of the survey, 03/01/2023 at 10:40am, the laboratory could not provide a twice-yearly peer review for the histopathology slides performed in 2021 and 2022. 2. The LD confirmed the findings above on 03/01/2023, around 11:05am.</p>
D5601	<p>HISTOPATHOLOGY CFR(s): 493.1273(a)(f)</p> <p>(a) As specified in 493.1256(e)(3), fluorescent and immunohistochemical stains must be checked for positive and negative reactivity each time of use. For all other differential or special stains, a control slide of known reactivity must be stained with each patient slide or group of patient slides. Reactions of the control slide with each special stain must be documented. (f) The laboratory must document all control procedures performed, as specified in this section.</p> <p>This STANDARD is not met as evidenced by: Based on review of quality control (QC) records and interview with the Laboratory Director (LD), the laboratory failed to document Immunohistochemical (IHC) and special stains QC performed on histopathology examinations in 2021 and 2022.</p>

Findings include: 1. On the day of the survey, 03/01/2023 at 10:10 am., a review of Histopathology tissue staining records revealed that IHC and special stains QC were not documented in 2021 and 2022. 2. The laboratory performed 417 IHC/Specials Stains in 2021 and 253 IHC/ special stains in 2022. 3. The LD confirmed the findings above on 03/01/2023 around 11:05 am.