

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  39D2135677	<b>(X3) Date Survey Completed</b>  07/17/2018
<b>Name of Provider or Supplier</b>  Advanced Dermatology Of Pennsylvania	<b>Street Address, City, State</b>  107 Gamma Drive, Ste 120, Pittsburgh, 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>D6072</b>	<p><b>TESTING PERSONNEL RESPONSIBILITIES</b> CFR(s): 493.1425(b)(3)</p> <p>Each individual performing moderate complexity testing must adhere to the laboratory's quality control policies, document all quality control activities, instrument and procedural calibrations and maintenance performed.</p> <p>This STANDARD is not met as evidenced by: Based on review of laboratory KOH Log, Internal Control Picture Verification record and interview with the office manager, the laboratory testing personnel (TP) failed to record KOH quality control (QC) in July 2018. Findings include: 1. The July 2018 laboratory KOH Log reads as follows: Date Patient Provider Internal Control Picture Verification (QC) 07/05 1 TP # 2 Blank 07/09 2 TP # 2 Blank 07/10 3 TP # 2 Blank 2. TP # 2 tested all (3 of 3) KOH specimens. 3. TP # 2 documented no (3 of 3) QC on KOH Log sheet. 4. TP # 2 reported all 3 KOH results in July 2018. 5. The office manager confirmed above findings on 07/17/2018 at 12:30 PM.</p>