

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 41D1097479	(X3) Date Survey Completed 10/17/2025
Name of Provider or Supplier Dermatology Professionals, Ap	Street Address, City, State 1672 South County Trail Suite 101, East Greenwich, RI	
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
D5401	<p>PROCEDURE MANUAL CFR(s): 493.1251(a)</p> <p>(a) A written procedures manual for all tests, assays, and examinations performed by the laboratory must be available to, and followed by, laboratory personnel. Textbooks may supplement but not replace the laboratory's written procedures for testing or examining specimens.</p> <p>This STANDARD is not met as evidenced by: REPEAT DEFICIENCY Based on record review and staff interview with the Mohs Clinical Resource Manager (CRM), the laboratory failed to follow their approved "Specimen Collection and Processing Procedure" for 7 of 11 Mohs cases. Findings include: 1. Record review on 10/16/2025 of the documentation and slides of 11 Mohs cases revealed the accession number on the slides did not match the Mohs map and final patient test report for 7 of 11 Mohs cases. 2. Record review on 10/16/2025 of the laboratory's "Specimen Collection and Processing Procedure" revealed, "The accession number, patient last name and first initial, layer or stage designated with roman numeral, piece number, and level or slide number (ascending letter designation) are recorded on each slide with a histology grade marking pen or pencil." 3. During staff interview with the CRM on 10/16/2025 at 11:08 AM, the CRM confirmed the slides in #1 above were mislabeled. 4. The laboratory performs 2500 tests in the specialty of Histopathology annually.</p>