Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 42D2079058	(X3) Date Survey Completed 06/05/2023
Name of Provider or Supplier Seaside Dermatology, Pa	**Street Address, City, State** 4017 Hwy 17, Suite 200, Murrells Inlet, SC	

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
D0000	A Recertification Survey was initiated on 06/05/2023 and concluded on 06/05/2023. The facility was found not to be in compliance with the laboratory requirements of 42 CFR Part 493 with deficiencies cited.
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 document review and interview, it was determined that Mohs examinations were not included in the list of tests or procedures in subpart I of the CLIA regulations. Therefore, they were subject to the requirements for accuracy verification twice annually. The accuracy of the Mohs examinations was being evaluated once annually. Findings included: A review of a laboratory "Procedure and Form 10: Mohs Surgery" document, signed by the Laboratory Director (LD) on 06/26/2020, revealed it lacked a procedure for performing the required twice-annual accuracy verification of Mohs examinations. A review of the laboratory manual revealed it contained instructions from the "American Society for Mohs Surgery," dated January 2022, for submitting case reviews. The instructions indicated a case was to be submitted once per year. Also included in the procedure manual were the results from a single case review performed for 2022. During an interview on 06/05/2023 at 11:30 PM, the LD stated she was unaware of the requirement for twice-annual accuracy verification for the performance of Mohs examinations.