

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 44D1089309	(X3) Date Survey Completed 05/07/2025
Name of Provider or Supplier Advanced Dermatology And Skin Cancer	Street Address, City, State 7658 Poplar Pike, Germantown, TN	
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
D3031	<p>RETENTION REQUIREMENTS CFR(s): 493.1105(a)(3)</p> <p>Analytic systems records. Retain quality control and patient test records (including instrument printouts, if applicable) and records documenting all analytic systems activities specified in 493.1252 through 493.1289 for at least 2 years. In addition, retain the following:</p> <p>This STANDARD is not met as evidenced by: Based on patient record review and staff interview, the laboratory failed to retain the Mohs map for one of patients reviewed from 2024 and 2025. The findings include: 1. A review of patient Mohs records revealed that the Mohs map was not retained for one of four cases reviewed (patient identification number 5241M147084, Mohs case number 11261, performed on 02/18/25). 2. The laboratory liaison confirmed the survey findings during an interview on 05/07/25 at 9:30 a.m.</p>
D5205	<p>COMPLAINT INVESTIGATIONS CFR(s): 493.1233</p> <p>The laboratory must have a system in place to ensure that it documents all complaints and problems reported to the laboratory. The laboratory must conduct investigations of complaints, when appropriate.</p> <p>This STANDARD is not met as evidenced by: Based on direct observation, review of the procedure manual, and staff interview, the laboratory failed to have a process in place for investigating complaints on the survey date. The findings include: 1. Laboratory observation on 05/07/25 at 8:15 a.m. revealed equipment used for processing tissue removed during Mohs micrographic surgical procedures and a microscope used for reading histopathology slides. 2. A</p>

review of the laboratory procedure manual revealed no policy, procedure, or process for investigating complaints related to laboratory testing. 3. The laboratory liaison confirmed the survey findings during an interview on 05/07/25 at 9:30 a.m.