

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b> 44D2073235	<b>(X3) Date Survey Completed</b> 09/16/2024
<b>Name of Provider or Supplier</b> Curcio Dermatology, Pc	<b>Street Address, City, State</b> 2125 Bandywood Dr, Nashville, TN	
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>D5417</b>	<p>TEST SYSTEMS, EQUIPMENT, INSTRUMENTS, REAGENT CFR(s): 493.1252(d)</p> <p>Reagents, solutions, culture media, control materials, calibration materials, and other supplies must not be used when they have exceeded their expiration date, have deteriorated, or are of substandard quality.</p> <p>This STANDARD is not met as evidenced by: Based on laboratory observation, patient test records, and staff interviews, the laboratory failed to ensure that it did not use four of four lots of tissue marking dyes beyond their expiration in micrographically oriented histographic surgery (MOHS) histopathology patient testing in 2023 and 2024. The findings include: 1. Observation of the laboratory on 09/16/2024 at 8:45 a.m. revealed the following opened Mercedes Scientific tissue marking dyes: - Green (lot: 21327) with an expiration date of 11/30/2023 - Yellow (lot: 21336) with an expiration date of 12/31/2023 - Red (lot: 21334 ) with an expiration date of 11/30/2023 - Blue (lot: 21299) with an expiration date of 10/31/2023 2. A review of the laboratory's MOHS patient case logs revealed the laboratory performed MOHS testing on 60 patient tissues after 10/31/2023- seven cases in 2023 and fifty-three in 2024. 3. An interview with the histotechnologist on 09/16/2024 at 9:00 a.m. confirmed that the laboratory used the observed tissue marking dyes for patient testing after expiration.</p>
<b>D6011</b>	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1407(e)(2)</p> <p>The laboratory director is responsible for the overall operation and administration of the laboratory, including the employment of personnel who are competent to perform test procedures, and record and report test results promptly, accurate, and proficiently and for assuring compliance with the applicable regulations. (e) The laboratory director must-- (e)(2) and provide a safe environment in which employees are</p>

protected from physical, chemical, and biological hazards.

This STANDARD is not met as evidenced by:

Based on laboratory observation and staff interviews, the laboratory failed to ensure appropriate safety measures were available to protect personnel from chemical and biological hazards involved in micrographically oriented histographic surgery (MOHS) tissue processing and testing when no eyewash was present in the laboratory area. The findings include: 1. Observation of the laboratory on 09/16/2024 at 8:45 a. m. revealed that the emergency eyewash station did not contain the eye saline eyewash bottles. 2. An interview with the histotechnologist on 09/16/2024 at 8:50 a. m. confirmed the laboratory did not have eyewash available.