

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  45D2130142	<b>(X3) Date Survey Completed</b>  08/15/2022
<b>Name of Provider or Supplier</b>  Cutis Wellness Dermatology And Dermatopathology	<b>Street Address, City, State</b>  1601 Jacaman Road, Suite 101, Laredo, TX	
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>D0000</b>	<p>Noted deficiencies and plans of correction were discussed with the laboratory representatives at the entrance and exit conferences. The facility representatives were given an opportunity to provide evidence of compliance with the noted deficiency, and no such evidence was provided prior to survey exit. The facility was found to be in compliance with applicable Conditions of Participation in the CLIA program, and certification is recommended. Note: The CMS-2567 (Statement of Deficiencies) is an official, legal document. All information must remain unchanged except for entering the plan of correction, correction dates, and the signature space. Any discrepancy in the original deficiency citation(s) will be reported to the Dallas Regional Office (RO) for referral to the Office of the Inspector General (OIG) for possible fraud. If information is inadvertently changed by the provider/supplier, the State Survey Agency (SA) should be notified immediately.</p>
<b>D5217</b>	<p><b>EVALUATION OF PROFICIENCY TESTING PERFORMANCE</b> CFR(s): 493.1236(c)(1)</p> <p>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.</p> <p>This STANDARD is not met as evidenced by: Based on review of the laboratory's test menu, review of the laboratory's records, and staff interview, it was revealed the laboratory failed to have documentation of performing twice annual accuracy assessment in 2021 for IHC stains, PAS stains, Colloidal, and Gram Stains. The findings include: 1. A review of the laboratory's test menu identified the laboratory performed interpretation of the following stains: Immunohistochemical stains PAS stains Colloidal Iron Gram Stains 2. A review of the laboratory records revealed the facility failed to have documentation of performing twice annual accuracy assessments for the identified tests in 2021. 3. The laboratory was asked to provide documentation of performing twice annual accuracy assessments in 2021. No documentation was provided. 4. An interview with the</p>

Laboratory Director on 08/15/2022 at 1615 hours in the nurse's station confirmed the findings. NOTE: THIS IS A REPEAT DEFICIENCY FROM SURVEYS CONDUCTED 08/14/2018 and 02/08/2021.