

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 45D2156591	(X3) Date Survey Completed 10/27/2020
Name of Provider or Supplier Complete Dermatology	Street Address, City, State 4500 Washington Avenue, Ste 250, Houston, TX	
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	<p>Noted deficiencies and plans of correction were discussed with the laboratory representative(s) at the exit conference. The facility representative(s) were given an opportunity to provide evidence of compliance with the noted deficiencies, 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 recertification 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>
D6102	<p>LABORATORY DIRECTOR RESPONSIBILITIES CFR(s): 493.1445(e)(12)</p> <p>The laboratory director must ensure that prior to testing patients' specimens, all personnel have the appropriate education and experience, receive the appropriate training for the type and complexity of the services offered, and have demonstrated that they can perform all testing operations reliably to provide and report accurate results.</p> <p>This STANDARD is not met as evidenced by: Based on a review of the laboratory's submitted CMS 209 form, the laboratory's personnel records, and staff interview, it was revealed the laboratory director failed to ensure 1 of 1 testing person had documentation of on-site training to perform high complexity testing- MOHS. Findings include: 1. A review of the CMS 209 form (signed by the laboratory director on 10/23/20) revealed the laboratory identified 1 testing person performing high complexity testing- MOHS. 2. A review of the laboratory's personnel records revealed testing person #1 (as indicated on the CMS</p>

209 form) failed to have documentation of on-site training for performing high complexity testing- MOHS. 3. An interview with the office manager on 10/27/20 at 10:40 a.m. in the break room revealed there was no documentation of training for testing person #1. This confirmed the above findings.