Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	45D2189532	01/27/2022
Name of Provider or Supplier	**Street Address, City, State**	
Bayou City Dermatology	750 N Texas Ave, Webster, 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	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.
D5401	PROCEDURE MANUAL CFR(s): 493.1251(a) A written procedures manual for all tests, assays, and examinations performed by the laboratory must be available to, and followed by, laboratory personnel. Textbooks may supplement but not replace the laboratory's written procedures for testing or examining specimens. This STANDARD is not met as evidenced by: Based on a review of the laboratory's policies, a random review of patient slides from 2020, 2021, and 2022, and staff interview, it was revealed that the laboratory failed to follow its policy for labeling slides for six of six patient's slides reviewed from 2020, 2021, and 2022. Findings include: 1. A review of the laboratory's policy titled 'Procedure and Form 10: Histopathology- Mohs Surgery' revealed the following: "Slides are labeled with surgical number, full patient name and date, cancer type, specimen source, and stage number." 2. A random review of patient slides from 2020, 2021, and 2022 revealed the following 6 patient slides were not labeled as required

	per the laboratory's policy: WW20-W8 - slides did not include the full patient name, date, cancer type, specimen source WW21-W501 - slides did not include the full patient name, date, cancer type, specimen source WW22-W35 - slides did not include the full patient name, date, cancer type, specimen source WW22-W36 - slides did not include the full patient name, date, cancer type WW22-W37 - slides did not include the full patient name, date, cancer type WW22-W41 - slides did not include the full patient name, date, cancer type, specimen source 3. An interview with the histotech on 1/27/22 at 9:20 a.m. in the laboratory, after review of the records, confirmed the above findings.