

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 45D2260496	(X3) Date Survey Completed 05/14/2025
Name of Provider or Supplier Us Dermatology Partners Weatherford - Martin	Street Address, City, State 1709 Marin Dr Suite 100, Weatherford, 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	The laboratory was found to be in substantial compliance with CLIA regulations 42 CFR Part 493. Standard level deficiencies were cited.
D5429	<p>MAINTENANCE AND FUNCTION CHECKS CFR(s): 493.1254(a)(1)</p> <p>(a)(1) Maintenance as defined by the manufacturer and with at least the frequency specified by the manufacturer.</p> <p>This STANDARD is not met as evidenced by: Based on review of laboratory policy, cryostat maintenance logs, and confirmed in interview, the laboratory failed to perform the monthly maintenance on cryostat A for three of four months in 2025 (February through April) and four of four months in 2025 (January through April) for cryostat B. Findings included: 1. Review of "QUALITY CONTROL PROGRAM" laboratory policy revealed: "EQUIPMENT QUALITY CONTROL - CRYOSTAT ... 7. Air filter is cleaned as part of the maintenance every month 8. Thermometer check is done monthly ... 13. Every action is documented on the maintenance record form" 2. Review of cryostat maintenance logs in 2025 revealed: Monthly maintenance tasks: "Defrost & Decontaminate Empty defrosting liquid & decontaminate container Once completely dry Oil moving parts" Note: Tasks on the monthly cryostat maintenance logs were not the same as those stated in the laboratory policy. Further review of the maintenance logs revealed: Cryostat A Serial # CNX00372401EP: no monthly maintenance was documented for February, March and April 2025 Cryostat B Serial # S22070072: no monthly maintenance was documented for January, February, March, and April 2025 The laboratory failed to perform the monthly maintenance as required. 3. During an interview in the staff break room on 05/14/2025 at 11:10 a.m., the Regional Clinical Manager, after a review of records confirmed the laboratory failed to perform monthly maintenance.</p>