

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 46D0524596	(X3) Date Survey Completed 08/19/2025
Name of Provider or Supplier Swinyer Woseth Dermatology	Street Address, City, State 1548 E 4500 S Suite 201/202, Salt Lake City, UT	
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
D6120	<p>TECHNICAL SUPERVISOR RESPONSIBILITIES CFR(s): 493.1451(b)(7)(8)</p> <p>(b)(7) Identifying training needs and assuring that each individual performing tests receives regular in-service training and education appropriate for the type and complexity of the laboratory services performed; (b)(8) Evaluating the competency of all testing personnel and assuring that the staff maintain their competency to perform test procedures and report test results promptly, accurately and proficiently.</p> <p>This STANDARD is not met as evidenced by: Based on lack of competency documentation and interview with the Practice Manager, the laboratory failed to evaluate competency for KOH testing for 6 out of 6 Testing Personnel (TP) . Findings include: 1. A laboratory record review revealed lack of competency documentation for KOH testing since the last survey on 1/09/2024 for 6 out of 6 TP. 2. Interview with Practice Manager on 9/19/2025 at approximately 11:45 a.m. confirmed that the laboratory failed to document competency for KOH testing for 6 out of 6 TP.</p>