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| Statement of Deficiencies | (X1) Provider/Supplier/CLIA Identification Number 46D2277901 | (X3) Date Survey Completed 01/26/2026 |
| Name of Provider or Supplier Revere Health Provo Dermatology | Street Address, City, State 1055 N 500 W Suite 111, Provo, 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 Office Manager, the laboratory failed to evaluate competency for KOH testing for 2 out of 5 Testing Personnel (TP) for the years 2024 and 2025. Findings include: 1. A laboratory record review revealed lack of competency documentation for KOH testing since the last survey on 4/04/2024 for 2 out of 5 TP. 2. Interview with Office Manager on 1/26 /2026 at approximately 11:32 a.m. confirmed that the laboratory failed to document competency for KOH testing for 2 out of 5 TP.</p> |