

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 49D0689266	(X3) Date Survey Completed 01/18/2018
Name of Provider or Supplier Dermatology Associates Of Virginia Pc	Street Address, City, State 201 Concourse Boulevard Suite 110, Glen Allen, VA	
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	An announced CLIA Recertification survey was conducted at the Dermatology Associates of Virginia on January 18, 2018 by the Virginia Department of Health's Office of Licensure and Certification. The laboratory was surveyed under 42 CFR part 493 CLIA Requirements. Specific deficiencies cited are as follows:
D5217	<p>EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1)</p> <p>At least twice annually, the laboratory must verify the accuracy of any test or procedure it performs that is not included in subpart I of this part.</p> <p>This STANDARD is not met as evidenced by: Based on the review of the potassium hydroxide (KOH) semi-annual verification records and an interview, the laboratory failed to verify the accuracy twice a year in 2017 for the KOH microscopic examinations. Findings include: 1. The review of the KOH semi-annual verification records for 2016 and 2017 revealed that the laboratory performed the accuracy verification on May 9, 2017. There were no other records available for review for a second verification in 2017. 2. An interview with the practice manager at approximately 11:00 AM confirmed that the laboratory failed to perform the twice a year accuracy verification for the KOH microscopic examinations in 2017.</p>