

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 49D0709112	(X3) Date Survey Completed 11/04/2020
Name of Provider or Supplier Us Dermatology Partners - Centreville	Street Address, City, State 13880 Braddock Rd Suite 301, Centreville, 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 on-site CLIA recertification survey was conducted at Derm Associates, LLC on November 4, 2020 by the Virginia Department of Health's Office of Licensure and Certification. The survey included an entrance interview on 09/29/2020 and virtual record review conducted on 10/28/2020. The laboratory was surveyed under 42 CFR part 493 CLIA Regulations. The specific deficiency is 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 a review of the laboratory's policies and procedures, verification of accuracy records, lack of documentation and an interview, the laboratory failed to perform one (1) of two (2) verification of accuracy evaluations for MOHS micrographic skin specimen testing in calendar year 2019. Findings include: 1. Review of the laboratory's procedure manual revealed a "Quality Control Program" policy for MOHS micrographic surgery skin specimens. The policy stated "The Laboratory Director will randomly select five (5) processed cases every six (6) months each calendar year to forward to a third party laboratory for comparative diagnosis. This will validated the original diagnosis provided by the Mohs surgeon for frozen section processed cases." 2. Review of the laboratory's verification of accuracy records from January 2019 to the date of survey revealed one (1) MOHS accuracy verification was performed and evaluated in calendar year 2019 (recorded on 12/27/19). The inspector requested documentation of additional verification of accuracy in 2019. The laboratory provided no additional documentation for review. 3. In an interview with the Mohs technician and practice manager on November 4, 2020 at approximately 9:30 AM, the above findings were confirmed.</p>