

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 53D1038865	(X3) Date Survey Completed 04/26/2022
Name of Provider or Supplier Western Wyoming Dermatology	Street Address, City, State 62 Redmond St, Jackson, WY	
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
D5407	<p>PROCEDURE MANUAL CFR(s): 493.1251(d)</p> <p>Procedures and changes in procedures must be approved, signed, and dated by the current laboratory director before use.</p> <p>This STANDARD is not met as evidenced by: . Based on review of the CMS-116 form, procedure manual review, and staff interview, the current laboratory director failed to sign, and date as approved, the laboratory's standard operating procedure and histopathology manuals. The findings were: 1. Review of the CMS-116 form showed a change of the laboratory director, effective 10/25/21, was approved on 10/27/21. 2. Review of the histopathology and standard operating manuals failed to include the current director's signature and date of approval. 3. Interview with the office manager and medical assistant on 4/26/22 at 8:27 AM confirmed the laboratory director had not reviewed and approved the procedure manuals.</p>