

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AC13960135	(X3) DATE SURVEY COMPLETED 01/02/2018
NAME OF PROVIDER OR SUPPLIER PLANNED PARENTHOOD OF SOUTH, EAST AND NORTH	STREET ADDRESS, CITY, STATE, ZIP CODE 585 NW 161 ST MIAMI, FL 33169	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 - INITIAL COMMENTS

A complaint survey CCR#2017011926 was conducted on January 2, 2018. Planned Parenthood of South Florida, East and North Florida, had no licensure deficiencies found at the time of the visit. License # 926.