

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AC13960135	(X3) DATE SURVEY COMPLETED 03/06/2019
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 re-licensure survey was conducted on March 06, 2019 at Planned Parenthood of South, East And North Florida. Planned Parenthood of South, East And North Florida had no deficiencies found at the time of the visit.