

#### **State of Ohio License Information**

Ambulatory Surgical Facility Program Page

# PLANNED PARENTHOOD BEDFORD HEIGHTS REGIONAL MED CE

State ID: 1014AS

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#### **Provider Demographics**

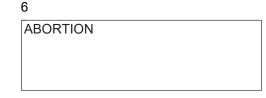
Address:	25350 ROCKSIDE ROAD	Ownership:	N/A
	BEDFORD HEIGHTS, OH 44146	Operator:	N/A
County:	CUYAHOGA	Administrator:	HOLLY MYERS
Phone Number:	(440)232-9732	Mailing Address	: 444 W EXCHANGE ST
Fax Number:	(440) 374-4969		AKRON, OH 44302
E-mail Address:	holly.meyers@ppoh.org		

## **State of Ohio License Information**

#### **General License Information:**

License Status:	ACTIVE
Licensed Date:	12/31/2017
License Expiration Date:	
Open Date:	12/14/2011

Licensed Capacity: Services:



\* A mailing address will appear if it is different from the business address



## NEW SEARCH

Enhanced Information Dissemination Version 3.0 Software release on: 07/28/2016