

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 01D2126498	(X3) Date Survey Completed 06/14/2023
Name of Provider or Supplier Medcenter Primary Care Pc	Street Address, City, State 4960 Rice Mine Road Ne Suite 10, Tuscaloosa, AL	
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	The surveyor determined this laboratory is in substantial compliance with the requirements of the Clinical Laboratory Improvement Amendments of 1988 (CLIA '88).