

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 04D0467888	(X3) Date Survey Completed 01/19/2018
Name of Provider or Supplier Baptist Urgent Clinic	Street Address, City, State 411 South Falls Blvd, Wynne, AR	
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
No Tags	No deficiency details available.