

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 06D1024422	(X3) Date Survey Completed 04/25/2018
Name of Provider or Supplier Summit Pathology Laboratories, Inc	Street Address, City, State 5802 Wright Dr, Loveland, CO	
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	A revisit survey was conducted on April 24-25, 2018 for all previous deficiencies cited on October 25, 2017. All deficiencies have been corrected, and no new noncompliance was found. The facility is in compliance with all regulations surveyed.