

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 14D2063316	(X3) Date Survey Completed 04/04/2018
Name of Provider or Supplier Spiriplex, Inc	Street Address, City, State 100 Tri State International, Ste 100, Lincolnshire, IL	
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.