

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  18D1012014	<b>(X3) Date Survey Completed</b>  10/22/2021
<b>Name of Provider or Supplier</b>  Baptist Family Physicians Of Scott County	<b>Street Address, City, State</b>  210 Bevins Lane, Georgetown, KY	
For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.		

<b>(X4) ID Prefix Tag</b>	<b>Summary Statement of Deficiencies</b>
<b>D0000</b>	On October 22, 2021 this facility was surveyed and found to comply with the laboratory requirements of Part 493.1000, 493.1001 and 493.1002 with no deficiencies.