

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 18D2241166	(X3) Date Survey Completed 10/10/2023
Name of Provider or Supplier P&C Labs Llc	Street Address, City, State 175 Hospital Dr, Winchester, KY	
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 Recertification Survey was initiated on 10/10/2023 and concluded on 10/10/2023. The facility was found to be in compliance with the laboratory requirements of 42 CFR Part 493.