

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 25D0692132	(X3) Date Survey Completed 05/22/2025
Name of Provider or Supplier Family Clinic,The	Street Address, City, State 101 Weems Street, Purvis, MS	
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	The Family Clinic is in compliance with 42 CFR Part 493, all subparts, requirements for clinical laboratories. No deficiencies were cited.