

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 31D0867580	(X3) Date Survey Completed 02/05/2018
Name of Provider or Supplier Grace U Chung, Md Pc	Street Address, City, State 500 Grove St, Haddon Heights, NJ	
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.