

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  36D0351337	<b>(X3) Date Survey Completed</b>  06/24/2021
<b>Name of Provider or Supplier</b>  Family Physicians Of Lima Inc	<b>Street Address, City, State</b>  2875 West Elm Street, Lima, OH	
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>	A remote inspection conducted on 06/24/2021 found Family Physicians of Lima laboratory is in compliance with CLIA SARS-CoV2 test reporting requirements.