

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 37D0670093	(X3) Date Survey Completed 09/14/2018
Name of Provider or Supplier Utica Park Clinic - Owasso	Street Address, City, State 10512 N 110th East Ave, Suite 300, Owasso, OK	
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.