

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 40D0913337	(X3) Date Survey Completed 12/10/2020
Name of Provider or Supplier Laboratorio Clinico Rivera,Inc	Street Address, City, State Carr 111 Km 0 Hm 6 Bo Angeles, Angeles, PR	
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 laboratorio Clinico Rivera, Inc. was found to be in substantial compliance with CLIA regulations (42 CFR Part 493, effective pril 24, 2003). No deficiencies were cited as a result of an virtually survey performed on December 10, 2020.