

<b>Statement of Deficiencies</b>	<b>(X1) Provider/Supplier/CLIA Identification Number</b>  44D0315529	<b>(X3) Date Survey Completed</b>  01/09/2018
<b>Name of Provider or Supplier</b>  Children's Clinic Pa Of West Tennessee, The	<b>Street Address, City, State</b>  264 Coatsland Dr, Jackson, TN	
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 revisit survey was conducted on Childrens Clinic PA, The for all previous deficiencies cited on November 16, 2017. All deficiencies have been corrected, and no new noncompliance was found. The facility is in compliance with all regulations surveyed.