

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 44D2123046	(X3) Date Survey Completed 03/06/2019
Name of Provider or Supplier Stones River Dermatology, Plc	Street Address, City, State 537 Stonecrest Pkwy Ste 200, Smyrna, TN	
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 Stones River Dermatology, PLC Laboratory was found in compliance with 42 C. F.R., Part 493, Requirements for Laboratories as result of an onsite survey on March 6, 2019.