

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 45D2024088	(X3) Date Survey Completed 05/10/2018
Name of Provider or Supplier Texas General Hospital	Street Address, City, State 2709 Hospital Blvd, Grand Prairie, TX	
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.