

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 45D2069850	(X3) Date Survey Completed 01/11/2018
Name of Provider or Supplier Altus Lake Jackson, Lp	Street Address, City, State 200 Oak Drive South, Lake Jackson, 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.