

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 45D2122137	(X3) Date Survey Completed 02/27/2018
Name of Provider or Supplier Precise Diagnostics, Llc	Street Address, City, State 2695 Villa Creek Dr Ste B255, Farmers Branch, 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.