Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 49D0867674	(X3) Date Survey Completed 09/12/2025
Name of Provider or Supplier Commonwealth Pediatrics	**Street Address, City, State** 6510 Harbour View Court Suite 100, Midlothian, VA	
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	An announced CLIA recertification survey was conducted at Commonwealth Pediatrics on September 12, 2025 by the Virginia Department of Health's Office of Licensure and Certification. The laboratory was surveyed under 42 CFR part 493 CLIA Regulations. Commonwealth Pediatrics is in compliance with the applicable Conditions and Standards under 42 CFR part 493 CLIA Regulations.