

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 49D2047470	(X3) Date Survey Completed 12/12/2022
Name of Provider or Supplier Virginia Physicians, Inc, Reynolds Primary Care	Street Address, City, State 6900 Forest Avenue - Suite 305, Richmond, 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 Virginia Physicians INC, Reynolds Primary Care on December 12, 2022 by the Virginia Department of Health's Office of Licensure and Certification. The laboratory was surveyed under 42 CFR part 493 CLIA Regulations. Virginia Physicians INC, Reynolds Primary Care is in compliance with the applicable Conditions and Standards under 42 CFR part 493 CLIA Regulations.