

X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345261	NAME OF PROVIDER OR SUPPLIER, STREET ADDRESS, CITY, STATE, ZIP CODE ALLEGHANY CENTER 179 COMBS STREET SPARTA, NC 28675	X3) DATE SURVEY COMPLETED 11/18/2015
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F 000 INITIAL COMMENTS

No deficiencies were cited as result of the complaint investigation. Event ID #M56Q11.