

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964810	(X3) DATE SURVEY COMPLETED R 11/15/2018
NAME OF PROVIDER OR SUPPLIER BROOKDALE CONWAY	STREET ADDRESS, CITY, STATE, ZIP CODE 5501 EAST MICHIGAN STREET ORLANDO, FL 32822	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 - Initial Comments

A revisit to the re-licensure survey with Limited Nursing Services was conducted on 11/15/18. . Brookdale Conway, license #9286, had no deficiencies at the time of the survey.