

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 03/22/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11943019	(X3) DATE SURVEY COMPLETED R 03/02/2017
NAME OF PROVIDER OR SUPPLIER GABLES MANOR INDEPENDENT INC	STREET ADDRESS, CITY, STATE, ZIP CODE 1535 VENETIA AVENUE CORAL GABLES, FL 33134	

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

0000 - Initial Comments

A Standard Biennial Survey revisit was conducted on 03/02/17. Gables Manor Independent Inc, license number 7926, had no deficiencies found at the time of the survey.