

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 05/02/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964437	(X3) DATE SURVEY COMPLETED 04/26/2017
NAME OF PROVIDER OR SUPPLIER BROOKDALE PUNTA GORDA ISLES	STREET ADDRESS, CITY, STATE, ZIP CODE 250 BAL HARBOR BLVD PUNTA GORDA, FL 33950	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced Limited Nursing Services survey was conducted 4/26/17 at Brookdale Punta Gorda Isles, assisted living facility (license #8980) located in Punta Gorda, Florida. No deficiencies were found at the time of the visit		