STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11963949	R **06/26/2018**
NAME OF PROVIDER OR SUPPLIER **BROOKDALE BRADENTON GARDENS**	STREET ADDRESS, CITY, STATE, ZIP CODE **5612 26TH STREET WEST** **BRADENTON, FL 34207**	

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

0000 - Initial Comments

Assisted Living Facility

A revisit was conducted on 6/26/18, in conjunction with a monitoring visit for limited nursing services at Brookdale Brookdale Bradenton Gardens. The facility had no deficient practice at the time of the revisit.

License # 6528