

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

**PRINTED: 03/19/2019
FORM APPROVED**

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11953352	(X3) DATE SURVEY COMPLETED R 03/11/2019
NAME OF PROVIDER OR SUPPLIER DIXIE OAK MANOR, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 6410 OLD DIXIE HWY VERO BEACH, FL 32967	

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

0000 - Initial Comments

A Revisit to the relicensure survey was conducted on 03/11/19 at Dixie Oak Manor, LLC, License #8502. Previously cited deficiencies were found corrected.