STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11963949	**06/10/2019**
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

A biennial re-licensure and complaint investigation (complaint numbers 2019004432 and 2019007307) was conducted at Brookdale Bradenton Gardens assisted living facility on 6/10/19. The facility had no deficiencies at the time of the visit.