

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 10/16/2024
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 255309	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED 08/06/2024
NAME OF PROVIDER OR SUPPLIER CEDARS HEALTH CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 2800 WEST MAIN STREET TUPELO, MS 38801		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE	
K 000	INITIAL COMMENTS 42 CFR 483.70(b) The facility meets the applicable provisions of the 2012 (existing) Edition of the Life Safety Code (LSC) of the National Fire Protection Association (NFPA). There were no LSC deficiencies cited during this survey.	K 000			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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08/19/2024

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NAME OF PROVIDER OR SUPPLIER CEDARS HEALTH CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 2800 WEST MAIN STREET TUPELO, MS 38801		
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NAME OF PROVIDER OR SUPPLIER CEDARS HEALTH CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 2800 WEST MAIN STREET TUPELO, MS 38801		
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NAME OF PROVIDER OR SUPPLIER CEDARS HEALTH CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 2800 WEST MAIN STREET TUPELO, MS 38801		
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NAME OF PROVIDER OR SUPPLIER CEDARS HEALTH CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 2800 WEST MAIN STREET TUPELO, MS 38801		
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NAME OF PROVIDER OR SUPPLIER CEDARS HEALTH CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 2800 WEST MAIN STREET TUPELO, MS 38801		
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NAME OF PROVIDER OR SUPPLIER CEDARS HEALTH CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 2800 WEST MAIN STREET TUPELO, MS 38801		
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NAME OF PROVIDER OR SUPPLIER CEDARS HEALTH CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 2800 WEST MAIN STREET TUPELO, MS 38801		
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NAME OF PROVIDER OR SUPPLIER CEDARS HEALTH CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 2800 WEST MAIN STREET TUPELO, MS 38801		
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NAME OF PROVIDER OR SUPPLIER CEDARS HEALTH CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 2800 WEST MAIN STREET TUPELO, MS 38801		
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NAME OF PROVIDER OR SUPPLIER CEDARS HEALTH CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 2800 WEST MAIN STREET TUPELO, MS 38801		
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