Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	55C0001076	07/10/2019
Name of Provider or Supplier	**Street Address, City, State**	
Plastic Surg Assoc Of Orange County	1310 Stewart Drive, Suite 610, Orange, CA	

For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.

(X4) ID Prefix Tag	**Summary Statement of Deficiencies** (Each deficiency should be preceded by full regulatory or LSC identifying information)
K0000	K3 BUILDING: 01 K6 PLAN APPROVAL: 1992 K7 SURVEY UNDER: 2012 EXISTING STRUCTURE TYPE: SIX STORIES with ASC on sixth floor, CONSTRUCTION TYPE 1 (111), FULLY-SPRINKLERED. The following reflects the findings of the California Department of Public Health, during a re-certification Life Safety Code survey. The findings are in accordance with 42 Code of Federal Regulations (CFR) §416.44(b)(c)(f) for Ambulatory Surgery Center, National Fire Protection Association (NFPA) 101 - Life Safety Code, 2012 Edition, and NFPA 99, Health Care Facilities Code, 2012 Edition. Representing the California Department of Public Health: 29566 Abbreviations: Ambulatory Surgical Center (ASC)