

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 012507	(X3) Date Survey Completed 03/14/2019
Name of Provider or Supplier Fresenius Kidney Care Mobile	Street Address, City, State 2620 Old Shell Road, Mobile, AL	
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)
V0000	'CORE'