

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 01P001	(X3) Date Survey Completed 03/29/2018
Name of Provider or Supplier Legacy Of Hope	Street Address, City, State 516 20th Street South, Birmingham, 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)
E0000	An unannounced Emergency Preparedness recertification survey was conducted onsite at Alabama Organ Center on 3/29/18. Alabama Organ Center is in compliance with Requirements for Emergency Preparedness of Organ Procurement Organizations.