

Statement of Deficiencies	(X1) Provider/Supplier/CLIA Identification Number 013433	(X3) Date Survey Completed 12/03/2025
Name of Provider or Supplier Perfect Kids And Family Care	Street Address, City, State 308 Prairie Street North, Union Springs, 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)
J0000	A recertification survey was conducted on 12/3/25 at Perfect Kids and Family Care Clinic. Standard level deficiencies were cited and will require a plan of correction.