

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 01/22/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965569	(X3) DATE SURVEY COMPLETED R 01/15/2019
NAME OF PROVIDER OR SUPPLIER SONATA BOCA RATON	STREET ADDRESS, CITY, STATE, ZIP CODE 9591 YAMATO ROAD BOCA RATON, FL 33434	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 - Initial Comments

An unannounced Relicensure Revisit survey was conducted by desk review on 01/15/2019 for Sonata Boca Raton, License #9911. The facility corrected the previously cited deficiency.

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 01/24/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965569	(X3) DATE SURVEY COMPLETED R 01/15/2019
NAME OF PROVIDER OR SUPPLIER SONATA BOCA RATON	STREET ADDRESS, CITY, STATE, ZIP CODE 9591 YAMATO ROAD BOCA RATON, FL 33434	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 - Initial Comments

An unannounced Relicensure Revisit survey was conducted by desk review on 01/15/2019 for Sonata Boca Raton, License #9911. The facility corrected the previously cited deficiency.