

## **Notice of Accreditation Survey**

Name of Organization: UCI Student Health Center	
☐ This is an Unannounced survey, or	
The Survey date(s) are:March 4-5, 2024	
The above-named organization has voluntarily reques means of having a third-party review of the entire organization of the entire organization organization organization and to determine if accreditation should organization.	nization to build upon strengths or gh-quality health care. The survey will standards for ambulatory health care
Members of the general public, patients, and individual believing that they have relevant and valid information health care or compliance with AAAHC Standards, madaAHC surveyors at the time of the survey <b>or</b> may coor by telephone to the AAAHC office.	about this organization's provision of ay request to present this information to
All information received from identified individuals at o in making the accreditation decision. The information preporting individual. Requests for presentation must be the survey in order to allow sufficient time to schedule	presented will not be debated with the e received at least two weeks prior to
A request to present or report information may be comaddress below; email to <a href="mailto:feedback@aaahc.org">feedback@aaahc.org</a> ; or by to	<b>5</b> ,
Accreditation Association for Ambulatory Health (3 Parkway North, Suite 201 Deerfield, IL 60015 Telephone: 847.853.6060 FAX: 847.853.9028	Care, Inc.
This Notice of Accreditation Survey is posted in accord may not be removed until after the survey has conclud days if the survey ends prior to that period.	•
Date This Notice Was Posted: Friday, January 12, 2024	
	itle: Administrative Director