

CENTERS FOR MEDICARE & MEDICAID SERVICES
 CLINICAL LABORATORY IMPROVEMENT AMENDMENTS
 CERTIFICATE OF COMPLIANCE

LABORATORY NAME AND ADDRESS
 CENTERS FOR DISEASE CONTROL AND PREVEN
 BLDG 1 ROOM 5047 MSC17
 1600 CLIFTON ROAD NE
 ATLANTA, GA 30333
 LABORATORY DIRECTOR
 DAVID K TURGEON PHD

CLIA ID NUMBER
 11D0668319
 EFFECTIVE DATE
 09/30/2004
 EXPIRATION DATE
 09/29/2006

Pursuant to Section 353 of the Public Health Services Act (42 U.S.C. 263a) as revised by the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address shown hereon (and other approved locations) may accept human specimens for the purposes of performing laboratory examinations or procedures.

This certificate shall be valid until the expiration date above, but is subject to revocation, suspension, limitation, or other sanctions for violation of the Act or the regulations promulgated thereunder.



Judith A. Yost

Judith A. Yost, Director
 Division of Laboratory Services
 Survey and Certification Group
 Center for Medicaid and State Operations

93 cs041110

If you currently hold a Certificate of Compliance or Certificate of Accreditation, below is a list of the laboratory specialties/subspecialties you are certified to perform and their effective date:

<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>	<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>
BACTERIOLOGY (110)	09/30/1996		
MYCOBACTERIOLOGY (115)	09/30/1994		
MYCOLOGY (120)	09/30/1994		
PARASITOLOGY (130)	09/30/1994		
VIROLOGY (140)	09/30/1994		
SYPHILIS SEROLOGY (210)	09/30/1994		
GENERAL IMMUNOLOGY (220)	09/30/1994		
HEMATOLOGY (400)	09/30/1994		
HISTOPATHOLOGY (610)	09/30/1994		
CYTOLOGY (630)	09/30/1994		

FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.HHS.GOV/CLIA OR CONTACT YOUR LOCAL STATE AGENCY. PLEASE SEE THE REVERSE FOR YOUR STATE AGENCY'S ADDRESS AND PHONE NUMBER.
 PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.