# CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

#### LABORATORY NAME AND ADDRESS

DEPARTMENT OF PATHOLOGY AND CLINICAL L 2800 PLYMOUTH ROAD, BUILDING 35 ANN ARBOR, MI 48109-2800

CLIA ID NUMBER 23D1088637

**EFFECTIVE DATE** 

12/31/2022

**EXPIRATION DATE** 

12/30/2024

## LABORATORY DIRECTOR

RICCARDO VALDEZ, M.D.

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.

Division of Clinical Laboratory Improvement & Quality Quality & Safety Oversight Group Center for Clinical Standards and Quality

Certs2\_120622

LAB CERTIFICATION (CODE)

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: STATE WENT DERES AND PECHLATION THE THE PARTY OF T

EFFECTIVE DATE

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06/19/2018
07/18/2018
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01/13/2011
01/17/2011
11/19/2018
11/19/2018
06/19/2018
06/19/2018

### LAB CERTIFICATION (CODE)

**EFFECTIVE** 

CYTOLOGY (630) CYTOGENETICS (900) 07/18/2018 12/31/2008



FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.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.