

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

LABORATORY NAME AND ADDRESS
CLINICAL REFERENCE LABORATORY, INC.
1121 OLD HIGHWAY 56
OLATHE, KS 66061

CLIA ID NUMBER
17D2073338

EFFECTIVE DATE
01/20/2024

LABORATORY DIRECTOR
SHAWN R CLINTON Ph.D.

EXPIRATION DATE
01/19/2026

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.



Monique Spruill
Monique Spruill, Director
Division of Clinical Laboratory Improvement & Quality
Quality & Safety Oversight Group
Center for Clinical Standards and Quality

162 certs_122623

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>
GENERAL IMMUNOLOGY (220)	01/20/2016
ROUTINE CHEMISTRY (310)	01/20/2016
URINALYSIS (320)	08/08/2018
TOXICOLOGY (340)	01/20/2016
HEMATOLOGY (400)	08/08/2018

LAB CERTIFICATION (CODE) EFFECTIVE DATE



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.

CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AGREEMENTS
CERTIFICATE OF ACCREDITATION

CLIA ID NUMBER
17D2073338
EFFECTIVE DATE
01/25/2024
EXPIRATION DATE
01/19/2028

LABORATORY MAILING ADDRESS
CLINICAL REFERENCE LABORATORY, INC
1131 OLD HIGHWAY 88
LENEXA, KS 66215

LABORATORY DIRECTOR
SHAWN R CLINTON Ph.D.

This certificate is issued to the laboratory for the purpose of certifying its compliance with the requirements of the Clinical Laboratory Improvement Amendments (CLIA) of 1988, as amended. The laboratory is certified to perform the following tests: [List of tests]

CLIA ID Number: 17D2073338
CLINICAL REFERENCE LABORATORY, INC
8433 QUIVIRA ROAD
CLINICAL REFERENCE LABORATORY
LENEXA, KS 66215



STATE AGENCY ADDRESS AND PHONE NUMBER:
KANSAS DEPARTMENT OF HEALTH & ENVIRONMENT
CLIA LABORATORY CERTIFICATION
6810 SE DWIGHT STREET
TOPEKA, KS 66620-0001
(785)296-8634

LABORATORY MAILING ADDRESS:

PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.
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