

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

LABORATORY NAME AND ADDRESS
CLINICAL REFERENCE LABORATORY
8433 QUIVIRA RD
LENEXA, KS 66215-2802

CLIA ID NUMBER
17D0667123

EFFECTIVE DATE
04/28/2019

LABORATORY DIRECTOR
ROBERT L STOUT Ph.D.

EXPIRATION DATE
04/27/2021

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.



Karen W. Dyer
Karen W. Dyer, Acting Director
Division of Laboratory Services
Survey and Certification Group
Center for Clinical Standards and Quality

223 Certs2_040219

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>
SYPHILIS SEROLOGY (210)	07/25/1995
GENERAL IMMUNOLOGY (220)	07/25/1995
ROUTINE CHEMISTRY (310)	07/25/1995
URINALYSIS (320)	07/25/1995
ENDOCRINOLOGY (330)	07/25/1995
TOXICOLOGY (340)	10/28/1999
HEMATOLOGY (400)	07/25/1995

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.