

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

LABORATORY NAME AND ADDRESS
KALAMAZOO COUNTY HEALTH AND COMMUNITY
311 E ALCOTT STREET, LABORATORY
KALAMAZOO, MI 49001

CLIA ID NUMBER
23D0377033

EFFECTIVE DATE
01/24/2021

LABORATORY DIRECTOR
MARTY K SOEHNLEN Ph.D.

EXPIRATION DATE
01/23/2023

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.



Amy M. Zale, Acting Director
Division of Laboratory Services
Survey and Certification Group
Center for Clinical Standards and Quality

116 Certs2_011921

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>
BACTERIOLOGY (110)	01/24/1995
MYCOLOGY (120)	01/24/1995
PARASITOLOGY (130)	01/24/1995
SYPHILIS SEROLOGY (210)	01/24/1995
GENERAL IMMUNOLOGY (220)	01/24/1995

<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>
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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.