CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF COMPLIANCE

LABORATORY NAME AND ADDRESS PATHOLOGY ASSOCIATES 471 SW SR 247 STE 107 LAKE CITY, FL 32025 CLIA ID NUMBER 10D0885189

EFFECTIVE DATE

05/15/2017

EXPIRATION DATE

05/14/2019

LABORATORY DIRECTOR

CHRISTOPHER R PRICE 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.

CENTERS FOR MEDICARE & MEDICADS SERVICES

Karen W. Dyer, Acting Director Division of Laboratory Services Survey and Certification Group

Center for Clinical Standards and Quality

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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:

LAB CERTIFICATION (CODE) HISTOPATHOLOGY (610) CYTOLOGY (630) EFFECTIVE DATE 05/15/2003 01/10/2014

LAB CERTIFICATION (CODE)

EFFECTIVE DATE