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

LABORATORY NAME AND ADDRESS UCHEALTH BROOMFIELD HOSPITAL 11820 DESTINATION DR BROOMFIELD, CO 80021

CLIA ID NUMBER 06D2112065

EFFECTIVE DATE

03/15/2023

EXPIRATION DATE

03/14/2025

LABORATORY DIRECTOR

DAWN R PAVOT 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.



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

Certs2_02212023

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 | CERTIFICA | TION | (CODE) | EFFECTIVE DATE |
|-----|-----------|------|--------|----------------|
| | | | | |

| BACTERIOLOGY (110) | 01/12/2018 |
|--------------------------------|------------|
| MYCOLOGY (120) | 01/12/2018 |
| PARASITOLOGY (130) | 03/15/2017 |
| GENERAL IMMUNOLOGY (220) | 03/15/2017 |
| ROUTINE CHEMISTRY (310) | 03/15/2017 |
| URINALYSIS (320) | 03/15/2017 |
| ENDOCRINOLOGY (330) | 03/15/2017 |
| TOXICOLOGY (340) | 03/15/2017 |
| HEMATOLOGY (400) | 03/15/2017 |
| ABO & RH GROUP (510) | 03/15/2017 |
| ANTIBODY TRANSFUSION (520) | 03/15/2017 |
| ANTIBODY NON-TRANSFUSION (530) | 03/15/2017 |

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.