

**CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS**

CERTIFICATE OF WAIVER

LABORATORY NAME AND ADDRESS

WEST SALEM MEDICAL OFFICE
1160 WALLACE RD NW
SALEM, OR 97304

CLIA ID NUMBER

38D1084667

EFFECTIVE DATE

06/12/2025

LABORATORY DIRECTOR

JULIA BONCHER

EXPIRATION DATE

06/11/2027

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.



A handwritten signature in blue ink, appearing to read "GB", located above the printed name and title of the Director.

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

If this is a Certificate of Waiver, it certifies the laboratory to perform only examinations or procedures that have been approved as waived tests by the Department of Health and Human Services.