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

## CERTIFICATE OF WAIVER

LABORATORY NAME AND ADDRESS

TRIHEALTH GOOD SAMARITAN FINNEYTOWN POC LAB 740 WEST GALBRAITH RD CINCINNATI, OH 45231

LABORATORY DIRECTOR

SAJINI MATHEW

CLIA ID NUMBER

36D2276257

**EFFECTIVE DATE** 

02/06/2025

**EXPIRATION DATE** 

02/05/2027

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.



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.