

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

**LABORATORY NAME AND ADDRESS**  
LABCORP OF AMERICA HOLDINGS  
CYTOGENETICS & CYTOLOGY & FLOW CYTOMET  
1904 T W ALEXANDER DRIVE, SUITE C  
RESEARCH TRIANGLE PARK, NC 27709

**CLIA ID NUMBER**  
34D1008914

**EFFECTIVE DATE**  
08/11/2019

**LABORATORY DIRECTOR**  
ARUNDHATI CHATTERJEE M.D.

**EXPIRATION DATE**  
08/10/2021

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.



*Karen W. Dyer*

Karen W. Dyer, 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:

<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>
GENERAL IMMUNOLOGY (220)	04/09/2007
ROUTINE CHEMISTRY (310)	09/14/2009
HEMATOLOGY (400)	04/09/2007
CYTOGENETICS (900)	08/11/2003

<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](http://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.