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

LABORATORY NAME AND ADDRESS DIAGNOSTIC LAB SERVICES - NORTH HAWAII 67-1123 MAMALAHOA HWY LUCY HENRIQUES MED CNTER SUITE 116 KAMUELA, HI 96743

**CLIA ID NUMBER** 12D2077899

**EFFECTIVE DATE** 

11/18/2023

**EXPIRATION DATE** 

11/17/2025

## LABORATORY DIRECTOR

ANA M ORTEGA LOPEZ 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

LAB CERTIFICATION (CODE)

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:

**EFFECTIVE DATE** 

BACTERIOLOGY (110)	11/18/2015	
MYCOLOGY (120)	11/18/2015	
PARASITOLOGY (130)	11/18/2015	
VIROLOGY (140)	08/27/2018	
GENERAL IMMUNOLOGY (220)	11/18/2015	
ROUTINE CHEMISTRY (310)	11/18/2015	
URINALYSIS (320)	11/18/2015	
ENDOCRINOLOGY (330)	11/18/2015	
TOXICOLOGY (340)	11/18/2015	
HEMATOLOGY (400)	11/18/2015	
ABO & RH GROUP (510)	11/18/2015	
ANTIBODY TRANSFUSION (520) Page	11/18/2015	
ANTIBODY NON-TRANSFUSION (530)	11/18/2015	

LAB	<b>CERTIFI</b>	<b>CATION</b>	(CODE)	<b>EFFECTIVE</b>	DATE

ANTIBODY IDENTIFICATION (540) 11/18/2015 COMPATIBILITY TESTING (550) 11/18/2015

