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

LABORATORY NAME AND ADDRESS
JOHNSON MEMORIAL HOSPITAL LABORATORY
1125 W JEFFERSON ST
FRANKLIN, IN 46131-2140

CLIA ID NUMBER 15D0859660

EFFECTIVE DATE

11/04/2016

EXPIRATION DATE

11/03/2018

LABORATORY DIRECTOR

CHANDRABHAN SINGH 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.

CCMS
CENTERS FOR MEDICARE & MEDICAD SERVICES

Karen W. Dyer, Acting 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> BACTERIOLOGY (110)	EFFECTIVE DATE 05/13/2005
MYCOBACTERIOLOGY (115)	05/13/2005
MYCOLOGY (120)	05/13/2005
PARASITOLOGY (130)	05/13/2005
VIROLOGY (140)	05/13/2005
SYPHILIS SEROLOGY (210)	05/13/2005
GENERAL IMMUNOLOGY (220)	05/13/2005
ROUTINE CHEMISTRY (310)	05/13/2005
URINALYSIS (320)	05/13/2005
ENDOCRINOLOGY (330)	05/13/2005
TOXICOLOGY (340)	05/13/2005
HEMATOLOGY (400)	05/13/2005
ABO & RH GROUP (510)	05/13/2005

LAB CERTIFICATION (CODE)	EFFECTIVE DATE
ANTIBODY TRANSFUSION (520)	05/13/2005
ANTIBODY NON-TRANSFUSION (530)	05/13/2005
COMPATIBILITY TESTING (550)	05/13/2005
HISTOPATHOLOGY (610)	05/13/2005
ORAL PATHOLOGY (620)	05/13/2005
CYTOLOGY (630)	05/13/2005