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

LABORATORY NAME AND ADDRESS NORTHWESTERN MED CONVENIENT CARE CHARL 2900 FOX FIELD ROAD SAINT CHARLES, IL 60174 CLIA ID NUMBER 14D0900178

EFFECTIVE DATE

11/04/2016

EXPIRATION DATE

11/03/2018

LABORATORY DIRECTOR

PHILIP MCHAFFEY, MD

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, Acting Director

Kareh 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:

 LAB CERTIFICATION (CODE)
 EFFECTIVE DATE

 PARASITOLOGY (130)
 06/30/2000

 GENERAL IMMUNOLOGY (220)
 10/20/2010

 ROUTINE CHEMISTRY (310)
 11/18/1996

 URINALYSIS (320)
 11/18/1996

 ENDOCRINOLOGY (330)
 01/22/1999

 HEMATOLOGY (400)
 11/18/1996

LAB CERTIFICATION (CODE)

EFFECTIVE DATE



FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT 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.