CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS REGIONAL MEDICAL LABORATORY 1900 N 14TH STREET PONCA CITY, OK 74601

CLIA ID NUMBER 37D0656760

EFFECTIVE DATE

09/10/2021

EXPIRATION DATE

09/09/2023

LABORATORY DIRECTOR

JASON STRATTON 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

certs2_081021

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) HISTOPATHOLOG: (610) CYTOLOGY (630)

EFFECTIVE DATE 09/10/2013

09/10/2013

LAB CERTIFICATION (CODE)

EFFECTIVE DATE



