CENTERS FOR MEDICARE & MEDICAID SERVICES **CLINICAL LABORATORY IMPROVEMENT AMENDMENTS**

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

VIROMED LABORATORIES, INC 1447 YORK COURT, ROOM 105 ATTN BRIAN BURT **BURLINGTON, NC 27215**

LABORATORY DIRECTOR

AJAY GROVER Ph.D.

CLIA ID NUMBER 24D0400424

EFFECTIVE DATE

02/28/2023

EXPIRATION DATE

02/27/2025

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.

DEPARTAGE



Monique Spruill, Director

Division of Clinical Laboratory Improvement & Quality Quality & Safety Oversight Group Center for Clinical Standards and Quality

Certs2_013123

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

BACTERIOLOGY (110) 09/06/1995 VIROLOGY (140) 09/06/1995 SYPHILIS SEROLOGY (210) 07/29/2005 **GENERAL IMMUNOLOGY (220)** 09/06/1995 ABO & RH GROUP (510) 05/03/2017





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.