

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

LABORATORY NAME AND ADDRESS

PRESTON MEMORIAL HOSPITAL
 300 SOUTH PRICE STREET
 KINGWOOD, WV 26537

LABORATORY DIRECTOR

RYAN H LIVENGOOD MD

CLIA ID NUMBER

51D0666196

EFFECTIVE DATE

12/09/2012

EXPIRATION DATE

12/08/2014

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.



Judith A. Yost

Judith A. Yost, Director
 Division of Laboratory Services
 Survey and Certification Group
 Center for Medicaid and State Operations

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>	<u>EFFECTIVE DATE</u>	<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>
BACTERIOLOGY (110)	12/09/2004	ANTIBODY NON-TRANSFUSION (530)	12/09/2004
MYCOLOGY (120)	12/09/2004	ANTIBODY IDENTIFICATION (540)	12/09/2004
PARASITOLOGY (130)	12/09/2004	COMPATIBILITY TESTING (550)	12/09/2004
VIROLOGY (140)	10/01/2005		
SYPHILIS SEROLOGY (210)	12/09/2004		
GENERAL IMMUNOLOGY (220)	12/09/2004		
ROUTINE CHEMISTRY (310)	12/09/2004		
URINALYSIS (320)	12/09/2004		
ENDOCRINOLOGY (330)	12/09/2004		
TOXICOLOGY (340)	12/09/2004		
HEMATOLOGY (400)	12/09/2004		
ABO & RH GROUP (510)	12/09/2004		
ANTIBODY TRANSFUSION (520)	12/09/2004		

FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.HHS.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.