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

CERTIFICATE OF COMPLIANCE

LABORATORY NAME AND ADDRESS

INDIANA STATE DEPARTMENT OF HEALTH LAB 550 W 16TH ST INDIANAPOLIS, IN 46202

**CLIA ID NUMBER** 15D0662599

**EFFECTIVE DATE** 

01/22/2021

LABORATORY DIRECTOR **EXPIRATION DATE** 

LIXIA LIU Ph.D. 01/21/2023

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\_042021

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) BACTERIOLOGY (110)	EFFECTIVE DATE 01/22/1993
MYCOBACTERIOLOGY (115)	01/22/1993
MYCOLOGY (120)	01/22/1993
VIROLOGY (140)	01/22/1993
SYPHILIS SEROLOGY (210)	01/22/1993
GENERAL IMMUNOLOGY (220)	01/22/1993
TOXICOLOGY (340)	01/22/1995

LAB CERTIFICATION (CODE)



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.