

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

LABORATORY NAME AND ADDRESS
MGH DEPARTMENT OF PATHOLOGY
55 FRUIT STREET GRB 539
BOSTON, MA 02114

CLIA ID NUMBER
22D0650226

EFFECTIVE DATE
10/20/2024

LABORATORY DIRECTOR
KENT B LEWANDROWSKI M.D.

EXPIRATION DATE
10/19/2026

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
Monique Spruill, Director
Division of Clinical Laboratory Improvement & Quality
Quality & Safety Oversight Group
Center for Clinical Standards and Quality

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>
HISTOCOMPATIBILITY (010)	01/29/2001	ABO & RH GROUP (510)	11/15/2001
BACTERIOLOGY (110)	11/15/2001	ANTIBODY TRANSFUSION (520)	11/15/2001
MYCOBACTERIOLOGY (115)	11/15/2001	ANTIBODY NON-TRANSFUSION (530)	11/15/2001
MYCOLOGY (120)	11/15/2001	ANTIBODY IDENTIFICATION (540)	11/15/2001
PARASITOLOGY (130)	11/15/2001	COMPATIBILITY TESTING (550)	11/15/2001
VIROLOGY (140)	11/15/2001	HISTOPATHOLOGY (610)	11/15/2001
SYPHILIS SEROLOGY (210)	11/15/2001	CYTOLOGY (630)	11/15/2001
GENERAL IMMUNOLOGY (220)	11/15/2001	CYTOGENETICS (900)	08/27/2011
ROUTINE CHEMISTRY (310)	11/15/2001		
URINALYSIS (320)	11/15/2001		
ENDOCRINOLOGY (330)	11/15/2001		
TOXICOLOGY (340)	11/15/2001		
HEMATOLOGY (400)	11/15/2001		

**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.**

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

LABORATORY NAME AND ADDRESS
 MGH DEPARTMENT OF PATHOLOGY
 85 FRUIT STREET, GRB 839
 BOSTON, MA 02114

LABORATORY DIRECTOR
 KENT B. EWANDROWSKI, M.D.

CLIA ID NUMBER
 22D0650226

EFFECTIVE DATE
 10/20/2024

EXPIRATION DATE
 10/19/2028

This certificate shall be valid until the expiration date shown hereon, but is subject to review and suspension for violation of the Accreditation Conditions prescribed hereunder. For the purpose of performing laboratory tests, services, or procedures, the above named laboratory located at the address shown hereon (and other approved locations) may accept human specimens pursuant to Section 323 of the Public Health Service Act (42 U.S.C. 323) as revised by the Clinical Laboratory Improvement Amendments (CLIA).

CLIA ID Number: 22D0650226
 MGH DEPARTMENT OF PATHOLOGY
 ATTN MGH DO PATHOLOGY / GRB - 536
 55 FRUIT STREET
 BOSTON, MA 02114



STATE AGENCY ADDRESS AND PHONE NUMBER:

MA DEPT OF PUBLIC HEALTH -CLINICAL LAB PROGRAM
 DIV OF HEALTHCARE LICENSURE&CERTIFICATION
 67 FOREST STREET
 MARLBOROUGH, MA 01752
 (617)660-5385

LAB CERTIFICATION (CODE)	EFFECTIVE DATE
HISTOCOMPATIBILITY (010)	01/18/2001
BACTERIOLOGY (110)	11/18/2001
MYCOBACTERIOLOGY (118)	11/18/2001
MYCOLOGY (120)	11/18/2001
PARASITOLOGY (130)	11/18/2001
VIROLOGY (140)	11/18/2001
SYSTEMS SEROLOGY (210)	11/18/2001
GENERAL IMMUNOLOGY (220)	11/18/2001
ROUTINE CHEMISTRY (310)	11/18/2001
URINALYSIS (320)	11/18/2001
ENDOCRINOLOGY (330)	11/18/2001
TOXICOLOGY (340)	11/18/2001
HEMATOLOGY (400)	11/18/2001

LABORATORY MAILING ADDRESS:

PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.
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