

CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF COMPLIANCE

LABORATORY NAME AND ADDRESS

WESTERN MD REGIONAL LABORATORY
STATE DEPT OF HEALTH & MENTAL HYGIENE
12503 WILLOWBROOK ROAD THE BROOK BLDG ENT # 6
CUMBERLAND, MD 21502

CLIA ID NUMBER

21D0649880

EFFECTIVE DATE

11/19/2015

EXPIRATION DATE

11/18/2017

LABORATORY DIRECTOR

ROBERT A MYERS Ph.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.



Karen W. Dyer
Karen W. Dyer, Acting Director
Division of Laboratory Services
Survey and Certification Group
Center for Clinical Standards and Quality

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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)

11/19/1993

SYPHILIS SEROLOGY (210)

11/19/1993

LAB CERTIFICATION (CODE)

EFFECTIVE DATE

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.

CLIA ID Number: 21D0649880

WESTERN MD REGIONAL LABORATORY
STATE DEPT OF HEALTH & MENTAL HYGIENE
PO BOX 1745 ATTN JO ANN FLINN
CUMBERLAND, MD 21501

STATE AGENCY ADDRESS AND PHONE NUMBER:

MD DHMH/OFFICE OF HEALTH CARE QUALITY - LABS
BLANT BRYANT BLDG/SPRING GROVE HOSP CENTER
55 WADE AVE
CATONSVILLE, MD 21228
(410)402-8025

LABORATORY MAILING ADDRESS: