CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF WAIVER

LABORATORY NAME AND ADDRESS

MGH SPECIAL FUNCTION LABS GROUP II 55 FRUIT STREET, MASS GENERAL HOSPITAL BOSTON, MA 02114

LABORATORY DIRECTOR

KENT B LEWANDROWSKI M.D.

CLIA ID NUMBER

22D0928000

EFFECTIVE DATE

11/06/2023 EXPIRATION DATE

11/05/2025

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.



Gregg Brandush, Director

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

- If this is a Certificate of Registration, it represents only the enrollment of the laboratory in the CLIA program and does not indicate a Federal certification of compliance with other CLIA requirements. The laboratory is permitted to begin testing upon receipt of this certificate, but is not determined to be in compliance until a survey is successfully completed.
- If this is a <u>Certificate for Provider-Performed Microscopy Procedures</u>, it certifies the laboratory to perform only those laboratory procedures that have been specified as provider-performed microscopy procedures and, if applicable, examinations or procedures that have been approved as waived tests by the Department of Health and Human Services.
- If this is a <u>Certificate of Waiver</u>, it certifies the laboratory to perform only examinations or procedures that have been approved as waived tests by the Department of Health and Human Services.





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 & MEDICAD SERVICES CLINICAL LABORATORMEMPROVEMENT AMENDMENTS

CERTIFICATE OF RAIFER

CLUA ID NUMBER

LABORATORY NAME AND ADDRESS

2200928000

EFFECTIVE DATE

MGH SPECIAL FUNCTION LABS GROUP II 55 FRUIT STREET, MASS GENERAL HOSPITAL BOSTON, MA 02/14

11/06/2023

EXPERATION DATE

LABORATORY DIRECTOR

11/06/2025

KENT B LEWANDROWSKI M.D.

Pursuant to Section 353 of the Public Health Services Act (62 U.S.C. 265a) as revirad for the Chintcal Laboratory Improvement Amendments (CLIA), the above named belonging Journel of the codiness shown better to client forestons) may accept human speciment.

In the number of newtons of provinces of provi

This conflicts shall be vel'd and the explusion do to start, but is subject to assect longer on with the institution, or other cancilons for violation of the act or to regalations propried and thereto don.

CLIA ID Number: 22D0928000

MGH SPECIAL FUNCTION LABS GROUP II

MGH, 55 FRUIT STREET

GRB-536 / DO PATHOLOGY BOSTON, MA 02114 ZRAZ)

If this is a <u>Centilicate of Registration</u>, it represents only the enrollment of the laboratory in the CLIA program and does not indicate a federal certification of compliance with other CLIA requirements; **SaaMun another QUA SCANGOR YONADA ATATZ** upon receipt of this certificate, but is not determined to be in compliance until a survey is accessfully completed.

MA DEPT OF PUBLIC HEALTH -CLINICAL LAB PROGRAM

DIV OF HEALTHCARE LICENSURE&CERTIFICATION

67 FOREST STREET

MARLBOROUGH, MA 01752

(617)660-5385

LABORATORY MAILING ADDRESS:

THE CONTRACT OF THE CONTRACT O

