CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF COMPLIANCE

LABORATORY NAME AND ADDRESS ALLOSOURCE

6278 S TROY CIR CENTENNIAL, CO 80111 O6D0865727

EFFECTIVE DATE

03/04/2022

EXPIRATION DATE

03/03/2024

LABORATORY DIRECTOR

HANNIS W THOMPSON M.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.



Regina S. Van Brakle

Regina S. Van Brakle, Acting Director Division of Laboratory Services Survey and Certification Group Center for Clinical Standards and Quality

222 Certs2_030822

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

LAB CERTIFICATION (CODE)

EFFECTIVE DATE

BACTERIOLOGY (110) MYCOLOGY (120) 03/04/1994 06/27/2011



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: 06D0865727 ALLOSOURCE 6278 S TROY CIR CENTENNIAL, CO 80111

STATE AGENCY ADDRESS AND PHONE NUMBER:

CO DEPT OF PUBLIC HEALTH & ENVIRONMENT LABORATORY SERVICES DIVISION 8100 LOWRY BLVD DENVER, CO 80230-6928 (303)692-3681

LABORATORY MAILING ADDRESS: