

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

LABORATORY NAME AND ADDRESS
NORDX - PEN BAY CAMPUS
6 GLEN COVE DRIVE
ROCKPORT, ME 04856

CLIA ID NUMBER
20D2045973

EFFECTIVE DATE
10/17/2018

LABORATORY DIRECTOR
SONJA TOMIC M.D.

EXPIRATION DATE
10/16/2020

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

21 Certs2_091818

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>
BACTERIOLOGY (110)	12/06/2016	COMPATIBILITY TESTING (550)	10/17/2012
PARASITOLOGY (130)	12/06/2016	HISTOPATHOLOGY (610)	10/17/2012
VIROLOGY (140)	12/06/2016	CYTOLOGY (630)	12/06/2016
GENERAL IMMUNOLOGY (220)	10/17/2012		
ROUTINE CHEMISTRY (310)	10/17/2012		
URINALYSIS (320)	12/06/2016		
ENDOCRINOLOGY (330)	10/17/2012		
TOXICOLOGY (340)	10/17/2012		
HEMATOLOGY (400)	10/17/2012		
ABO & RH GROUP (510)	10/17/2012		
ANTIBODY TRANSFUSION (520)	10/17/2012		
ANTIBODY NON-TRANSFUSION (530)	10/17/2012		
ANTIBODY IDENTIFICATION (540)	10/17/2012		

**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.**