

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

LABORATORY NAME AND ADDRESS
PARKVIEW LAGRANGE HOSPITAL LAB
207 N TOWNLINE RD
LAGRANGE, IN 46761

CLIA ID NUMBER
15D0357805

EFFECTIVE DATE
01/03/2017

LABORATORY DIRECTOR
XINGCAO NIE M.D.

EXPIRATION DATE
01/02/2019

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

647 Certs2_120616

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>
BACTERIOLOGY (110)	07/19/2010
MYCOLOGY (120)	07/19/2010
PARASITOLOGY (130)	07/19/2010
ROUTINE CHEMISTRY (310)	04/10/2007
URINALYSIS (320)	07/19/2010
ENDOCRINOLOGY (330)	04/10/2007
TOXICOLOGY (340)	04/10/2007
HEMATOLOGY (400)	07/19/2010
ABO & RH GROUP (510)	04/10/2007
ANTIBODY TRANSFUSION (520)	04/10/2007
ANTIBODY NON-TRANSFUSION (530)	04/10/2007
COMPATIBILITY TESTING (550)	04/10/2007

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: 15D0357805
PARKVIEW LAGRANGE HOSPITAL LAB
ATTN JOE LOCK- PARKVIEW HEALTH LABS
11109 PARKVIEW PLAZA DR
FORT WAYNE, IN 46845

CLIA ID NUMBER
15D0357805
EXPIRATION DATE
01/31/2019

LABORATORY NAME AND ADDRESS
PARKVIEW LAGRANGE HOSPITAL LAB
307 N TOWNLINE RD
LAGRANGE, IN 46845
LABORATORY DIRECTOR
KIMCO'S WILSON

CLIA ID NUMBER: 15D0357805
PARKVIEW LAGRANGE HOSPITAL LAB
ATTN JOE LOCK- PARKVIEW HEALTH LABS
11109 PARKVIEW PLAZA DR
FORT WAYNE, IN 46845



STATE AGENCY ADDRESS AND PHONE NUMBER:

INDIANA STATE DEPARTMENT OF HEALTH
DIVISION OF ACUTE CARE SERVICES
2 NORTH MERIDIAN ST RM 4A
INDIANAPOLIS, IN 46204
(317)233-7502

LABORATORY MAILING ADDRESS:

PLEASE COPY TO YOUR STATE HEALTH DEPARTMENT FOR YOUR CLIA ID NUMBER
YOUR STATE AGENCY'S ADDRESS AND PHONE NUMBER
OR CONTACT YOUR LOCAL STATE HEALTH DEPARTMENT FOR CLIA ID NUMBER