## CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

## CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

SANFORD AMBER VALLEY 4820 23RD AVE S SUITE 100 FARGO, ND 58104

O, ND 58104 EFFECTIVE DATE
11/23/2024

LABORATORY DIRECTOR EXPIRATION DATE

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.

CENTERS FOR MEDICARE & MEDICAID SERVICES

DR. FELIX ROTH

Gregg Brandush, Director

Division of Clinical Laboratory Improvement & Quality Quality & Safety Oversight Group

CLIA ID NUMBER

35D2203722

11/22/2026

Center for Clinical Standards and Quality

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
MICROBIOLOGY - BACTERIOLOGY (110)	11/23/2022		
MICROBIOLOGY - MYCOBACTERIOLOGY (115)	11/23/2022		
MICROBIOLOGY - MYCOLOGY (120)	11/23/2022		
MICROBIOLOGY - PARASITOLOGY (130)	11/23/2022		
MICROBIOLOGY - VIROLOGY (140)	11/23/2022		
DIAGNOSTIC IMMUNOLOGY - GENERAL IMMUNOLOGY (220)	11/23/2022		
CHEMISTRY - ROUTINE CHEMISTRY (310)	11/23/2022		
HEMATOLOGY (400)	11/23/2022		
PATHOLOGY - HISTOPATHOLOGY (610)	11/23/2022		
PATHOLOGY - CYTOLOGY (630)	11/23/2022		
CLINICAL CYTOGENETICS (900)	11/23/2022		