

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

LABORATORY NAME AND ADDRESS
CHI HEALTH NEBRASKA HEART
7500 SOUTH 91ST STREET
LINCOLN, NE 68526

CLIA ID NUMBER
28D1008576

EFFECTIVE DATE

08/27/2023

EXPIRATION DATE

08/26/2025

LABORATORY DIRECTOR
TYLER R TEICHMEIER 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.



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

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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 dates:

<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>	<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>
BACTERIOLOGY (110)	08/27/2003		
ROUTINE CHEMISTRY (310)	08/27/2003		
URINALYSIS (320)	08/27/2003		
ENDOCRINOLOGY (330)	08/27/2003		
TOXICOLOGY (340)	08/27/2003		
HEMATOLOGY (400)	08/27/2003		
AEO & RH GROUP (510)	08/27/2003		
ANTIBODY TRANSFUSION (520)	08/27/2003		
ANTIBODY NON-TRANSFUSION (530)	08/27/2003		
ANTIBODY IDENTIFICATION (540)	08/27/2003		
COMPATIBILITY TESTING (550)	08/27/2003		
HISTOPATHOLOGY (610)	01/25/2005		



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.