CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

VERSITI WISCONSIN, INC 9000 W WISCONSIN AVE WAUWATOSA, WI 53226

CLIA ID NUMBER

52D0913702

EFFECTIVE DATE

04/13/2024

LABORATORY DIRECTOR

ROWENA PUNZALAN

EXPIRATION DATE

04/12/2026

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 section 353 of the Fubilic Fleatint Services Act (42 0.33.c., 203a) as revised by the Chinical Laboratory Improvement Amendments 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.



Gregg Brandush, Director

Division of Clinical Laboratory Improvement & Quality

Quality & Safety Oversight Group 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) LAB CERTIFICATION (CODE) EFFECTIVE DATE EFFECTIVE DATE

IMMUNOHEMATOLOGY - ABO GROUP & RH TYPE (510) 04/13/1998

IMMUNOHEMATOLOGY - ANTIBODY DETECTION (TRANSFUSION) (520) 04/19/1998

IMMUNOHEMATOLOGY - ANTIBODY DETECTION (NON-TRANSFUSION) (530) 04/19/1998

IMMUNOHEMATOLOGY - ANTIBODY IDENTIFICATION (540) 04/19/1998

IMMUNOHEMATOLOGY - COMPATIBILITY TESTING (550) 04/19/1998