

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

LABORATORY NAME AND ADDRESS  
 KNOXVILLE REGIONAL LABORATORY  
 2101 MEDICAL CENTER WAY  
 KNOXVILLE, TN 37920

CLIA ID NUMBER  
 44D0659252

EFFECTIVE DATE  
 04/22/2012

LABORATORY DIRECTOR  
 DAVID L SMALLEY

EXPIRATION DATE  
 04/21/2014

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.



*Judith A. Yost*

Judith A. Yost, Director  
 Division of Laboratory Services  
 Survey and Certification Group  
 Center for Medicaid and State Operations

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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 date:

<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>	<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>
BACTERIOLOGY (110)	04/22/1994		
VIROLOGY (140)	09/28/2005		
SYPHILIS SEROLOGY (210)	04/22/1996		
GENERAL IMMUNOLOGY (220)	04/22/1994		



FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT [WWW.CMS.HHS.GOV/CLIA](http://WWW.CMS.HHS.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.