

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

LABORATORY NAME AND ADDRESS
COMMUNITY MEDICAL CENTER LAB
2827 FORT MISSOULA ROAD
MISSOULA, MT 59804-7407

CLIA ID NUMBER
27D0666145

EFFECTIVE DATE
01/03/2021

LABORATORY DIRECTOR
NICOLE M FINKE M.D.

EXPIRATION DATE
01/02/2023

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.



Amy M. Zale

Amy M. Zale, Acting Director
Division of Laboratory Services
Survey and Certification Group
Center for Clinical Standards and Quality

720 Certs2_120820

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)	03/16/2001	ANTIBODY NON-TRANSFUSION (530)	07/11/2002
MYCOLOGY (120)	03/16/2001	ANTIBODY IDENTIFICATION (540)	07/11/2002
PARASITOLOGY (130)	03/16/2001	COMPATIBILITY TESTING (550)	07/11/2002
VIROLOGY (140)	03/16/2001	HISTOPATHOLOGY (610)	07/11/2002
SYPHILIS SEROLOGY (210)	03/16/2001	ORAL PATHOLOGY (620)	07/11/2002
GENERAL IMMUNOLOGY (220)	03/16/2001	CYTOLOGY (630)	07/11/2002
ROUTINE CHEMISTRY (310)	03/16/2001		
URINALYSIS (320)	03/16/2001		
ENDOCRINOLOGY (330)	03/16/2001		
TOXICOLOGY (340)	03/16/2001		
HEMATOLOGY (400)	03/16/2001		
ABO & RH GROUP (510)	03/16/2001		
ANTIBODY TRANSFUSION (520)	07/11/2002		

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: 27D0666145
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MISSOULA, MT 59804-7407



STATE AGENCY ADDRESS AND PHONE NUMBER:

MONTANA DIVISION OF QUALITY ASSURANCE CLIA PRO
DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVIC
2401 COLONIAL DRIVE, 2ND FLOOR
PO BOX 202953
HELENA, MT 59620-2953
(406)444-2099

LABORATORY MAILING ADDRESS: