

CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF COMPLIANCE

LABORATORY NAME AND ADDRESS
PHYSICIANS LABORATORY SERVICES
4600 VALLEY ROAD SUITE 200
LINCOLN, NE 68510

CLIA ID NUMBER
28D0991162

EFFECTIVE DATE
01/30/2016

LABORATORY DIRECTOR
ERIN M LINDE M.D.

EXPIRATION DATE
01/29/2018

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.



Karen W. Dyer
Karen W. Dyer, Acting Director
Division of Laboratory Services
Survey and Certification Group
Center for Clinical Standards and Quality

156 Certs2_010516

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>
BACTERIOLOGY (110)	01/30/2002
MYCOLOGY (120)	01/30/2002
PARASITOLOGY (130)	01/30/2002
GENERAL IMMUNOLOGY (220)	01/30/2002
ROUTINE CHEMISTRY (310)	04/28/2011
URINALYSIS (320)	01/30/2002
ENDOCRINOLOGY (330)	01/30/2002
HEMATOLOGY (400)	01/30/2002

<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>
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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.