## **CENTERS FOR MEDICARE & MEDICAID SERVICES** CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

## **CERTIFICATE OF ACCREDITATION**

LABORATORY NAME AND ADDRESS

**UCHEALTH EMERGENCY ROOM** 15300 E MISSISSIPPI AVE AURORA, CO 80017

CLIA ID NUMBER

06D2101018

**EFFECTIVE DATE** 

08/24/2024

LABORATORY DIRECTOR

DR. MELKON DOMBOURIAN

**EXPIRATION DATE** 

08/23/2026

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:

EFFECTIVE DATE LAB CERTIFICATION (CODE) EFFECTIVE DATE LAB CERTIFICATION (CODE)