

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

LABORATORY NAME AND ADDRESS
NEWAYGO COUNTY GENERAL HOSPITAL
DBA SPECTRUM HEALTH GERBER MEMORIAL
212 S SULLIVAN ST
FREMONT, MI 49412-1596

CLIA ID NUMBER
23D0037736

EFFECTIVE DATE
01/03/2023

LABORATORY DIRECTOR
CYNTHIA L COOKINGHAM M.D.

EXPIRATION DATE
01/02/2025

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.



Monique Spruill
Monique Spruill, Director
Division of Clinical Laboratory Improvement & Quality
Quality & Safety Oversight Group
Center for Clinical Standards and Quality

608 Certs2_120622

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)	02/13/2017	COMPATIBILITY TESTING (550)	02/13/2017
PARASITOLOGY (130)	06/20/2019		
VIROLOGY (140)	02/13/2017		
GENERAL IMMUNOLOGY (220)	02/13/2017		
ROUTINE CHEMISTRY (310)	02/13/2017		
URINALYSIS (320)	02/13/2017		
ENDOCRINOLOGY (330)	02/13/2017		
TOXICOLOGY (340)	02/13/2017		
HEMATOLOGY (400)	02/13/2017		
ABO & RH GROUP (510)	02/13/2017		
ANTIBODY TRANSFUSION (520)	02/13/2017		
ANTIBODY NON-TRANSFUSION (530)	02/13/2017		
ANTIBODY IDENTIFICATION (540)	02/13/2017		



**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.**