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

## CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

U OF I HOSPITALS & CLINICS EYE PATHOLOGY LAB 233 MEDICAL RESEARCH CENTER 200 HAWKINS DRIVE IOWA CITY, IA 52242-1182

LABORATORY DIRECTOR

DR. NASREEN A. SYED

**CLIA ID NUMBER** 

16D0648107

EFFECTIVE DATE

09/16/2025

EXPIRATION DATE

09/15/2027

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.



Gregg Brandush. Director

Division of Clinical Laboratory Improvement & Quality

Quality & Safety Oversight Group

Center for Clinical Standards and Quality