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

LABORATORY NAME AND ADDRESS UNIVERSITY OF VERMONT MEDICAL CENTER-M 111 COLCHESTER AVE BURLINGTON, VT 05401-1473 CLIA ID NUMBER 47D0660960

EFFECTIVE DATE

10/20/2020

EXPIRATION DATE

10/19/2022

LABORATORY DIRECTOR

ANDREW J GOODWIN M.D.

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, Director

Division of Laboratory Services Survey and Certification Group Center for Clinical Standards and Quality

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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:

LAB CERTIFICATION (CODE) BACTERIOLOGY (110)	EFFECTIVE DATE 10/13/1995
MYCOBACTERIOLOGY (115)	10/13/1995
MYCOLOGY (120)	10/13/1995
PARASITOLOGY (130)	10/13/1995
VIROLOGY (140)	10/13/1995
SYPHILIS SEROLOGY (210)	09/21/2004
GENERAL IMMUNOLOGY (220)	10/13/1995
ROUTINE CHEMISTRY (310)	10/13/1995
URINALYSIS (320)	10/13/1995
ENDOCRINOLOGY (330)	10/13/1995
TOXICOLOGY (340)	10/13/1995
HEMATOLOGY (400)	10/13/1995
ABO & RH GROUP (510)	10/13/1995

LAB CERTIFICATION (CODE)	EFFECTIVE DATE
ANTIBODY TRANSFUSION (520)	10/13/1995
ANTIBODY NON-TRANSFUSION (530)	10/13/1995
ANTIBODY IDENTIFICATION (540)	10/13/1995
COMPATIBILITY TESTING (550)	10/13/1995
HISTOPATHOLOGY (610)	10/1 <mark>3/199</mark> 5
ORAL PATHOLOGY (620)	10/13/1995
CYTOLOGY (630)	06/13/2003
CYTOGENETICS (900)	10/13/1995

