

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

LABORATORY NAME AND ADDRESS
MAYO CLINIC HEALTH SYSTEM CANNON FALLS
32021 COUNTY 24 BLVD
CANNON FALLS, MN 55009

CLIA ID NUMBER
24D0398077

EFFECTIVE DATE
01/24/2023

LABORATORY DIRECTOR
VIPUL A TRIVEDI M.D.

EXPIRATION DATE
01/23/2025

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

144 Certs2_122722

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)	02/12/2019
MYCOLOGY (120)	02/12/2019
PARASITOLOGY (130)	02/12/2019
GENERAL IMMUNOLOGY (220)	02/12/2019
ROUTINE CHEMISTRY (310)	02/12/2019
URINALYSIS (320)	02/12/2019
ENDOCRINOLOGY (330)	02/12/2019
TOXICOLOGY (340)	12/21/2018
HEMATOLOGY (400)	02/12/2019

LAB CERTIFICATION (CODE) EFFECTIVE DATE



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.

CLIA ID Number: 24D0398077

MAYO CLINIC HEALTH SYSTEM CANNON FALLS
MAYO CLINIC ATTN JENNY NOSBISCH PLUMMER 6 600-1
200 1ST ST SW
ROCHESTER, MN 55905

STATE AGENCY ADDRESS AND PHONE NUMBER:

MN DEPARTMENT OF HEALTH
LICENSING & CERTIFICATION SECTION CLIA PROGRAM
PO BOX 64900
SAINT PAUL, MN 55164-0900
(651)201-4120

LABORATORY MAILING ADDRESS: