CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS
BAKOTIC PATHOLOGY ASSOCIATES, LLC
6240 SHILOH ROAD
ALPHARETTA, GA 30005

CLIA ID NUMBER 11D1077435

EFFECTIVE DATE

12/26/2018

LABORATORY DIRECTOR

EXPIRATION DATE

SCOTT M ACKER M.D.

12/25/2020

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.

CMS CENTERS FOR MEDICARE & MEDICADE SERVICES

Karen W. Dyer, Acting Director Division of Laboratory Services Survey and Certification Group Center for Clinical Standards and Quality

Karen W. Duer