CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS
GEISINGER LEWISTOWN HOSPITAL LABORATOR
LABORATORY ADMINISTRATION (MAILCODE 46-41)
400 HIGHLAND AVE EXT
LEWISTOWN, PA 17044-1164

CLIA ID NUMBER 39D0657316

EFFECTIVE DATE

02/28/2023

EXPIRATION DATE

02/27/2025

LABORATORY DIRECTOR

WELLS M CHANDLER 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.

DEPARTAL

EFFECTIVE DATE

07/26/1995

07/26/1995 07/26/1995



Monique Spruill, Director

Division of Clinical Laboratory Improvement & Quality

Quality & Safety Oversight Group

Center for Clinical Standards and Quality

184 Certs2 013123

LAB CERTIFICATION (CODE)

ANTIBODY TRANSFUSION (520)
ANTIBODY NON-TRANSFUSION (530)

ANTIBODY IDENTIFICATION (540)

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:

07/26/1995
09/29/2017
07/25/2011
07/26/1995
07/26/1995
07/26/1995
07/26/1995
03/29/2003
07/26/1995
07/26/1995

LAB CERTIFICATION (CODE)

EFFECTIVE DATE

COMPATIBILITY TESTING (550) 07/26/1995 HISTOPATHOLOGY (610) 11/25/1996 CYTOLOGY (630) 07/26/1995

