

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

CERTIFICATE OF COMPLIANCE

LABORATORY NAME AND ADDRESS

UNIVERSITY OF LOUISVILLE INFECTIOUS DISEASES
LABORATORY
580 S PRESTON ST SUITE 102
LOUISVILLE, KY 40202

CLIA ID NUMBER

18D0648480

EFFECTIVE DATE

11/17/2023

LABORATORY DIRECTOR

DR. LESLIE A. WOLF

EXPIRATION DATE

11/16/2025

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.



Gregg Brandush, Director
Division of Clinical Laboratory Improvement & Quality
Quality & Safety Oversight Group
Center for Clinical Standards and Quality

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)	EFFECTIVE DATE	LAB CERTIFICATION (CODE)	EFFECTIVE DATE
MICROBIOLOGY - BACTERIOLOGY (110)	11/17/1993		
MICROBIOLOGY - VIROLOGY (140)	05/25/2005		
DIAGNOSTIC IMMUNOLOGY - SYPHILIS SEROLOGY (210)	03/29/2017		
DIAGNOSTIC IMMUNOLOGY - GENERAL IMMUNOLOGY (220)	05/04/2009		

**PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.
FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.GOV/CLIA.**