

CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF COMPLIANCE

LABORATORY NAME AND ADDRESS
BEACON DIAGNOSTICS LABORATORY
124 BERNARD E ST JEAN DRIVE
E FALMOUTH, MA 02536

CLIA ID NUMBER
22D1021258

EFFECTIVE DATE

01/14/2023

EXPIRATION DATE

01/13/2025

LABORATORY DIRECTOR

PATRICIA C DEVINE 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.



Monique Spruill
Monique Spruill, Director
Division of Clinical Laboratory Improvement & Quality
Quality & Safety Oversight 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:

<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>	<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>
MYCOLOGY (120)	01/14/2005		



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: 22D1021258
BEACON DIAGNOSTICS LABORATORY
124 BERNARD E ST JEAN DRIVE
E FALMOUTH, MA 02536

STATE AGENCY ADDRESS AND PHONE NUMBER:

MA DEPT OF PUBLIC HEALTH -CLINICAL LAB PROGRAM
DIV OF HEALTHCARE LICENSURE&CERTIFICATION
67 FOREST STREET
MARLBOROUGH, MA 01752
(617)660-5385

LABORATORY MAILING ADDRESS: