

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

LABORATORY NAME AND ADDRESS
GENETICS ASSOCIATES
1916 PATTERSON ST STE 400
NASHVILLE, TN 37203

CLIA ID NUMBER
44D0688266

EFFECTIVE DATE
06/07/2017

LABORATORY DIRECTOR
VAITHLINGAM G DEV Ph.D.

EXPIRATION DATE
06/06/2019

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.



A handwritten signature in black ink, which appears to read "Karen W. Dyer". The signature is written in a cursive style.

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