

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

LABORATORY NAME AND ADDRESS
LABORATORY FOR MOLECULAR MEDICINE
65 LANDSDOWNE STREET 3RD FLOOR
CAMBRIDGE, MA 02139

CLIA ID NUMBER
22D1005307

EFFECTIVE DATE
07/02/2024

LABORATORY DIRECTOR
MATTHEW LEBO Ph.D.

EXPIRATION DATE
07/01/2026

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>
GENERAL IMMUNOLOGY (220)	11/11/2005
ROUTINE CHEMISTRY (310)	07/02/2004
CYTOGENETICS (900)	09/17/2007

LAB CERTIFICATION (CODE) EFFECTIVE DATE



**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.**

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

CLIA ID NUMBER
22D1005307
EFFECTIVE DATE
07/02/2024
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07/01/2026

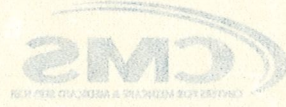
LABORATORY NAME AND ADDRESS
LABORATORY FOR MOLECULAR MEDICINE
85 LANDSDOWNE STREET 3RD FLOOR
CAMBRIDGE, MA 02138

LABORATORY DIRECTOR
MATTHEW LEBO Ph.D.

Pursuant to section 1333 of the Public Health Service Act (42 U.S.C. 1333) and the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address above (and other approved locations) may accept human specimens for the purpose of performing laboratory examinations or procedures.

CLIA ID Number: 22D1005307
LABORATORY FOR MOLECULAR MEDICINE
MGH / GRB 536 / DO PATHOLOGY
55 FRUIT STREET
BOSTON, MA 02114

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



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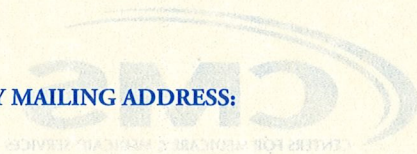
If you currently hold a Certificate of Compliance or Certificate of Accreditation, below is a list of the laboratory

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

LAB CERTIFICATION (CODE)	EFFECTIVE DATE
GENERAL IMMUNOLOGY (220)	1/11/2002
ROUTINE CHEMISTRY (310)	07/02/2004
CYTOGENETICS (800)	09/17/2004

LABORATORY MAILING ADDRESS:



PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE
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