CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF WAIVER

LABORATORY NAME AND ADDRESS

BAPTIST HEALTH REHABILITATION INSTITUTE 9601 BAPTIST HEALTH DRIVE LITTLE ROCK, AR 72205

LABORATORY DIRECTOR

DR. MELODY K. HARRISON

CLIA ID NUMBER

04D2078859

EFFECTIVE DATE

06/05/2024

EXPIRATION DATE

06/04/2026

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.



Gregg Brandush, Director

Division of Clinical Laboratory Improvement & Quality

Quality & Safety Oversight Group

Center for Clinical Standards and Quality