

CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS
RUSH DEPARTMENT OF PATHOLOGY
RUSH UNIVERSITY MEDICAL CENTER
1653 W CONGRESS PARKWAY - ROOM 532 JELKE
CHICAGO, IL 60612

CLIA ID NUMBER
14D0696069

EFFECTIVE DATE

07/27/2015

EXPIRATION DATE

07/26/2017

LABORATORY DIRECTOR

ROBERT P DE CRESCE, MD

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 that reads "Karen W. Dyer".

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