CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

YOSEMITE PATHOLOGY MEDICAL GROUP INC 4301 NORTHSTAR WAY MODESTO, CA 95356 O5D0644036

EFFECTIVE DATE

04/28/2023

EXPIRATION DATE

04/27/2025

LABORATORY DIRECTOR

ANTHONY R VICTORIO 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.

CIMS CENTERS FOR MEDICARE & MEDICARE SERVICES

Monique Spruill

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

Quality & Safety Oversight Group Center for Clinical Standards and Quality

371 certs2_032823

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:

LAB CERTIFICATION (CODE) EFFECTIVE DATE

BACTERIOLOGY (110) 03/12/2003 05/12/2022 MYCOLOGY (120) PARASITOLOGY (130) 04/05/2018 VIROLOGY (140) 03/12/2003 HISTOPATHOLOGY (610) 07/25/1995 **ORAL PATHOLOGY (620)** 07/25/1995 06/13/2003 CYTOLOGY (630) 08/28/2009 CYTOGENETICS (900)

LAB CERTIFICATION (CODE)

EFFECTIVE DATE



CLIA ID Number: 05D0644036 YOSEMITE PATHOLOGY MEDICAL GROUP INC 4301 NORTHSTAR WAY MODESTO, CA 95356

STATE AGENCY ADDRESS AND PHONE NUMBER:

CA DHS/LABORATORY FIELD SERVICES DIVISION OF LABORATORY SCIENCE 320 WEST 4TH STREET SUITE 890 LOS ANGELES, CA 90013-2398 (213)620-6160

LABORATORY MAILING ADDRESS: