

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

LABORATORY NAME AND ADDRESS
MONONGALIA GENERAL HOSPITAL WEDGEWOOD
300 WEDGEWOOD DRIVE
MORGANTOWN, WV 26505

CLIA ID NUMBER
51D1096086

EFFECTIVE DATE
09/14/2010

LABORATORY DIRECTOR
DANA M WONSETTLER MD

EXPIRATION DATE
09/13/2012

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.



Judith A. Yost

Judith A. Yost, Director
Division of Laboratory Services
Survey and Certification Group
Center for Medicaid and State Operations

96 certs2_101610

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>	<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>
ROUTINE CHEMISTRY (310)	09/14/2010		
HEMATOLOGY (400)	09/14/2010		

FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.HHS.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.

CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF WAIVER

LABORATORY NAME AND ADDRESS
MONGENERAL HOSPITAL
FAST CARE
4500 UNIVERSITY TOWN CENTER DRIVE
MORGANTOWN, WV 26501

CLIA ID NUMBER

51D1105021

EFFECTIVE DATE

09/15/2011

LABORATORY DIRECTOR
DANA M WONSETTLER MD

EXPIRATION DATE

09/14/2013

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A handwritten signature in cursive script, reading "Judith A. Yost". The signature is located to the right of the CMS logo and above the printed name of the Director.

Judith A. Yost, Director
Division of Laboratory Services
Survey and Certification Group
Center for Medicaid and State Operations

340 certs1_082011

- If this is a Certificate of Registration, it represents only the enrollment of the laboratory in the CLIA program and does not indicate a Federal certification of compliance with other CLIA requirements. The laboratory is permitted to begin testing upon receipt of this certificate, but is not determined to be in compliance until a survey is successfully completed.
- If this is a Certificate for Provider-Performed Microscopy Procedures, it certifies the laboratory to perform only those laboratory procedures that have been specified as provider-performed microscopy procedures and, if applicable, examinations or procedures that have been approved as waived tests by the Department of Health and Human Services.
- If this is a Certificate of Waiver, it certifies the laboratory to perform only examinations or procedures that have been approved as waived tests by the Department of Health and Human Services.

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

LABORATORY NAME AND ADDRESS
 MONONGALIA GENERAL HOSPITAL
 1200 JD ANDERSON DRIVE
 MORGANTOWN, WV 26505-3494

CLIA ID NUMBER
 51D0236653

EFFECTIVE DATE
 02/09/2011

LABORATORY DIRECTOR
 DANA M WONSETTLER MD

EXPIRATION DATE
 02/08/2013

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.



Judith A. Yost

Judith A. Yost, Director
 Division of Laboratory Services
 Survey and Certification Group
 Center for Medicaid and State Operations

200 Certs2_011511

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>	<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>
BACTERIOLOGY (110)	08/09/1995	ANTIBODY IDENTIFICATION (540)	08/09/1995
MYCOLOGY (120)	09/16/1996	COMPATIBILITY TESTING (550)	08/09/1995
PARASITOLOGY (130)	08/09/1995	HISTOPATHOLOGY (610)	08/09/1995
VIROLOGY (140)	06/23/2004	ORAL PATHOLOGY (620)	06/30/2000
GENERAL IMMUNOLOGY (220)	08/09/1995	CYTOLOGY (630)	08/09/1995
ROUTINE CHEMISTRY (310)	08/09/1995		
URINALYSIS (320)	08/09/1995		
ENDOCRINOLOGY (330)	08/09/1995		
TOXICOLOGY (340)	06/30/2000		
HEMATOLOGY (400)	08/09/1995		
ABO & RH GROUP (510)	08/09/1995		
ANTIBODY TRANSFUSION (520)	08/09/1995		
ANTIBODY NON-TRANSFUSION (530)	08/09/1995		

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