

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

LABORATORY NAME AND ADDRESS

FLORIDA HOSPITAL DELAND CLINICAL LAB
701 WEST PLYMOUTH AVENUE
DELAND, FL 32720

LABORATORY DIRECTOR

MARIO H ALVARADO MD

CLIA ID NUMBER

10D0273364

EFFECTIVE DATE

02/28/2009

EXPIRATION DATE

02/27/2011

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 "Judith A. Yost". The signature is written in a cursive style.

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