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

LABORATORY NAME AND ADDRESS XTANT MEDICAL LABORATORY 600 CRUISER LANE BELGRADE, MT 59714

**CLIA ID NUMBER** 27D1036610

**EFFECTIVE DATE** 

10/12/2023

**EXPIRATION DATE** 

10/11/2025

LABORATORY DIRECTOR

KENNETH R CONGER 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.

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

Center for Clinical Standards and Quality

Certs2\_091223

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

LAB CERTIFICATION (CODE)

**BACTERIOLOGY (110)** 

10/12/2005





FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.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. CLIA ID Number: 27D1036610 XTANT MEDICAL LABORATORY 600 CRUISER LANE BELGRADE, MT 59714

## STATE AGENCY ADDRESS AND PHONE NUMBER:

MT CLIA PROGRAM- CERTIFICATION BUREAU OIG - DEPT PUBLIC HEALTH&HUMAN SVCS PO BOX 202953 2401 COLONIAL DRIVE, 2ND FLOOR HELENA, MT 59620-2953 (406)444-2099

**LABORATORY MAILING ADDRESS:**