

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

**LABORATORY NAME AND ADDRESS**  
SARAH BUSH LINCOLN CENTER  
1000 HEALTH CENTER DRIVE  
PO BOX 372  
MATTOON, IL 61938

**CLIA ID NUMBER**  
14D0667363

**EFFECTIVE DATE**  
03/15/2019

**LABORATORY DIRECTOR**  
ROBERT K REUTER DO

**EXPIRATION DATE**  
03/14/2021

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.



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

274 Certs2\_021919

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>
BACTERIOLOGY (110)	03/27/2006
MYCOBACTERIOLOGY (115)	03/27/2006
MYCOLOGY (120)	03/27/2006
PARASITOLOGY (130)	03/27/2006
VIROLOGY (140)	03/27/2006
SYPHILIS SEROLOGY (210)	03/27/2006
GENERAL IMMUNOLOGY (220)	03/27/2006
ROUTINE CHEMISTRY (310)	03/27/2006
URINALYSIS (320)	03/27/2006
ENDOCRINOLOGY (330)	03/27/2006
TOXICOLOGY (340)	03/27/2006
HEMATOLOGY (400)	03/27/2006
ABO & RH GROUP (510)	03/27/2006

<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>
ANTIBODY TRANSFUSION (520)	03/27/2006
ANTIBODY NON-TRANSFUSION (530)	03/27/2006
ANTIBODY IDENTIFICATION (540)	03/27/2006
COMPATIBILITY TESTING (550)	03/27/2006
HISTOPATHOLOGY (610)	03/27/2006
ORAL PATHOLOGY (620)	03/27/2006
CYTOLOGY (630)	03/27/2006

FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT [WWW.CMS.GOV/CLIA](http://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.



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

**LABORATORY NAME AND ADDRESS**  
SARAH BUSH LINCOLN HEALTH CENTER  
EFFINGHAM LABORATORY  
905 NORTH MAPLE  
EFFINGHAM, IL 62401

**CLIA ID NUMBER**  
14D0963030

**EFFECTIVE DATE**  
02/02/2019

**LABORATORY DIRECTOR**  
ROBERT K REUTER MD

**EXPIRATION DATE**  
02/01/2021

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.

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

223 Certs2\_010819

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>
BACTERIOLOGY (110)	11/04/2010
GENERAL IMMUNOLOGY (220)	11/04/2010
ROUTINE CHEMISTRY (310)	11/04/2010
URINALYSIS (320)	11/04/2010
ENDOCRINOLOGY (330)	11/04/2010
HEMATOLOGY (400)	11/04/2010

<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>
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