CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

ST JOSEPHS HOSPITAL 172 KINSLEY ST NASHUA, NH 03060-3648 CLIA ID NUMBER

30D0002651

EFFECTIVE DATE

02/28/2021

EXPIRATION DATE

LABORATORY DIRECTOR

LESLEY J WOODS M.D.

02/27/2023

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.



Regina & Van Brakle

Regina'S. Van Brakle, Acting Director Division of Laboratory Services Survey and Certification Group Center for Clinical Standards and Quality

60 Certs2_020221

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)	EFFECTIVE DATE
BACTERIOLOGY (110)	07/14/1995	ANTIBODY NON-TRANSFUSION (530)	07/14/1995
MYCOLOGY (120)	10/10/1996	ANTIBODY IDENTIFICATION (540)	07/14/1995
PARASITOLOGY (130)	07/14/1995	COMPATIBILITY TESTING (550)	07/14/1995
VIROLOGY (140)	10/10/1996	HISTOPATHOLOGY (610)	07/14/1995
SYPHILIS SEROLOGY (210)	09/02/1998	ORAL PATHOLOGY (620)	11/06/2007
GENERAL IMMUNOLOGY (220)	07/14/1995	CYTOLOGY (630)	10/10/1996
ROUTINE CHEMISTRY (310)	07/14/1995	CYTOGENETICS (900)	02/03/2014
URINALYSIS (320)	07/14/1995	01100ENE1100 (000)	02/00/2011
ENDOCRINOLOGY (330)	03/29/2003		
TOXICOLOGY (340)	03/29/2003	2	
HEMATOLOGY (400)	07/14/1995	*	
ABO & RH GROUP (510)	07/14/1995		
ANTIBODY TRANSFUSION (520)	07/14/1995		
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