

CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF COMPLIANCE

LABORATORY NAME AND ADDRESS

NORDX- PORTSMOUTH CAMPUS
PEASE INTERNATIONAL TRADEPORT 161 CORPORATE DR
PORTSMOUTH, NH 03801

LABORATORY DIRECTOR

GENE R PUTZ

CLIA ID NUMBER

30D1039827
EFFECTIVE DATE

06/15/2008
EXPIRATION DATE

06/14/2010

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 cursive script, which appears to read "Judith A. Yost".

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