CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF WAIVER

LABORATORY NAME AND ADDRESS
UNIV OF CALIF DAVIS HEALTH SYSTEMS
DEPT OF OPHTHALMOLOGY & VISION SCIENCE
77 CADILLAC DRIVE, SUITE 101
SACRAMENTO, CA 95825

CLIA ID NUMBER
05D1062730

EFFECTIVE DATE
12/21/2016

LABORATORY DIRECTOR
MARK J MANNIS

EXPIRATION DATE
12/20/2018

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. Dye,
Director
Division of Laboratory Services
Survey and Certification Group
Center for Clinical Standards and Quality

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.