

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

**LABORATORY NAME AND ADDRESS**  
BWH CYTOLOGY LABORATORY  
75 FRANCIS STREET  
BOSTON, MA 02115

**CLIA ID NUMBER**  
22D2040975

**EFFECTIVE DATE**  
08/23/2022

**LABORATORY DIRECTOR**

JEFFREY MITO M.D.

**EXPIRATION DATE**  
08/22/2024

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*

Monique Spruill, Director  
Division of Clinical Laboratory Improvement & Quality  
Quality & Safety Oversight Group  
Center for Clinical Standards and Quality

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>	<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>
GENERAL IMMUNOLOGY (220)	08/22/2014		
CYTOLOGY (630)	08/23/2012		



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.

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JEFFREY MITCHELL

The Department of Health and Human Services (HHS) is pleased to announce that the Centers for Medicare & Medicaid Services (CMS) has issued a Certificate of Accreditation (COA) to BWH CytoLOGY Laboratory, 75 Francis Street, Boston, MA 02115, for the period of performance from 08/23/2022 to 08/23/2024. This accreditation is valid until the expiration date listed in the certificate, unless the laboratory is notified of a suspension or other action by CMS. The laboratory is required to maintain the accreditation standards and conditions of the COA.

**CLIA ID Number: 22D2040975**

BWH CYTOLOGY LABORATORY  
ELLEN M GOONAN BRIGHAM AND WOMEN'S HOSPITAL  
75 FRANCIS STREET, AMORY 2, ROOM 215  
BOSTON, MA 02115



**STATE AGENCY ADDRESS AND PHONE NUMBER:**

MA DEPT OF PUBLIC HEALTH -CLINICAL LAB PROGRAM  
DIV OF HEALTHCARE LICENSURE&CERTIFICATION  
67 FOREST STREET  
MARLBOROUGH, MA 01752  
(617)753-7307

**LABORATORY MAILING ADDRESS:**

PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.  
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