

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

LABORATORY NAME AND ADDRESS
LEGACY LABORATORY SERVICES MT HOOD
24800 SE STARK ST
GRESHAM, OR 97030-3378

CLIA ID NUMBER
38D0621949

EFFECTIVE DATE

01/01/2024

EXPIRATION DATE

12/31/2025

LABORATORY DIRECTOR

TAHA SACHAK M.D.

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

270 Certs2_120523

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>
BACTERIOLOGY (110)	01/01/2000	HISTOPATHOLOGY (610)	01/01/2000
PARASITOLOGY (130)	02/12/2008	ORAL PATHOLOGY (620)	02/12/2008
VIROLOGY (140)	11/18/2015	CYTOLOGY (630)	06/12/2000
GENERAL IMMUNOLOGY (220)	01/01/2000		
ROUTINE CHEMISTRY (310)	01/01/2000		
URINALYSIS (320)	01/01/2000		
ENDOCRINOLOGY (330)	01/01/2000		
TOXICOLOGY (340)	03/29/2003		
HEMATOLOGY (400)	01/01/2000		
ABO & RH GROUP (510)	01/01/2000		
ANTIBODY TRANSFUSION (520)	01/01/2000		
ANTIBODY NON-TRANSFUSION (530)	01/01/2000		
COMPATIBILITY TESTING (550)	01/01/2000		



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.

CLIA ID Number: 38D0621949

LEGACY LABORATORY SERVICES MT HOOD
1225 NE 2ND AVE, BLDG B, 2ND FLOOR
ATTN LEGACY LAB ADMINISTRATION
PORTLAND, OR 97232

STATE AGENCY ADDRESS AND PHONE NUMBER:

OREGON STATE PUBLIC HEALTH LAB (OSPHL)

7202 NE EVERGREEN PARKWAY, SUITE 100
HILLSBORO, OR 97124
(503)693-4125

LABORATORY MAILING ADDRESS: