



Advancing Excellence

The College of American Pathologists

certifies that the laboratory named below

Wooster Community Hospital
Main Laboratory
Wooster, Ohio
Arun E. Masih, DO

LAP Number: 1661201
AU-ID: 1182482
CLIA Number: 36D0909139

has met all applicable standards for accreditation and is hereby fully accredited by the College of American Pathologists' Laboratory Accreditation Program. Reinspection should occur prior to November 1, 2013 to maintain accreditation.

Accreditation does not automatically survive a change in director, ownership, or location and assumes that all interim requirements are met.

Frank R. Rudy

Chair, Commission on Laboratory Accreditation

Stephen H. Baum MD FCAP

President, College of American Pathologists

Accredited
Laboratory



CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF WAIVER

LABORATORY NAME AND ADDRESS

WOOSTER COM HOSP/COMMUNITY EDUCATION
1761 BEALL AVENUE
WOOSTER, OH 44691

CLIA ID NUMBER

36D0927859

EFFECTIVE DATE

05/01/2009

LABORATORY DIRECTOR

ARUN E MASIH MD

EXPIRATION DATE

04/30/2011

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.



Judith A. Yost

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

740 certs1_040409

- If this is a Certificate of Registration, it represents only the enrollment of the laboratory in the CLIA program and does not indicate a Federal certification of compliance with other CLIA requirements. The laboratory is permitted to begin testing upon receipt of this certificate, but is not determined to be in compliance until a survey is successfully completed.
- If this is a Certificate for Provider-Performed Microscopy Procedures, it certifies the laboratory to perform only those laboratory procedures that have been specified as provider-performed microscopy procedures and, if applicable, examinations or procedures that have been approved as waived tests by the Department of Health and Human Services.
- If this is a Certificate of Waiver, it certifies the laboratory to perform only examinations or procedures that have been approved as waived tests by the Department of Health and Human Services.



FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.HHS.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.

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

LABORATORY NAME AND ADDRESS

WOOSTER COMMUNITY HOSPITAL
1761 BEALL AVENUE
WOOSTER, OH 44691

CLIA ID NUMBER

36D0909139

EFFECTIVE DATE

04/05/2010

LABORATORY DIRECTOR

ARUN E MASIH DO

EXPIRATION DATE

04/04/2012

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Judith A. Yost

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

141 certs2_030610

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)	04/05/1996	ANTIBODY NON-TRANSFUSION (530)	04/05/1996
MYCOLOGY (120)	07/05/2005	ANTIBODY IDENTIFICATION (540)	04/05/1996
PARASITOLOGY (130)	12/22/1999	COMPATIBILITY TESTING (550)	04/05/1996
VIROLOGY (140)	04/05/1996	HISTOPATHOLOGY (610)	04/05/1996
SYPHILIS SEROLOGY (210)	04/05/1996	ORAL PATHOLOGY (620)	08/01/2001
GENERAL IMMUNOLOGY (220)	04/05/1996	CYTOLOGY (630)	12/17/2003
ROUTINE CHEMISTRY (310)	04/05/1996		
URINALYSIS (320)	04/05/1996		
ENDOCRINOLOGY (330)	04/05/1996		
TOXICOLOGY (340)	03/13/1998		
HEMATOLOGY (400)	04/05/1996		
ABO & RH GROUP (510)	04/05/1996		
ANTIBODY TRANSFUSION (520)	04/05/1996		

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American Proficiency Institute

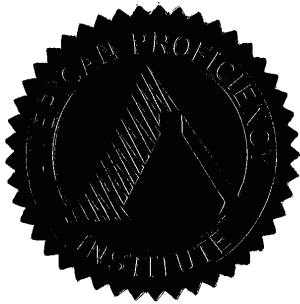
PROFICIENCY TESTING SERVICE

2011

CERTIFICATE OF PARTICIPATION

This certifies

Wooster Community



*as a participant in a continuous program of
quality assurance for laboratory testing.*

DAN EDSON

Daniel C. Edson, President



The College of American Pathologists recognizes

Wooster Community Hospital
16612-01-01

For participation in the Surveys and Anatomic
Pathology Education Program

Stephen N. Bauer MD FCAP

Stephen N. Bauer, MD, FCAP
CAP President

2010
Surveys, EXCEL
and Anatomic
Pathology Education
Programs

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

LABORATORY NAME AND ADDRESS
WOOSTER COMMUNITY HOSPITAL - POINT OF
WAIVED TESTING
1761 BEALL AVENUE
WOOSTER, OH 44691

CLIA ID NUMBER
36D0927859

EFFECTIVE DATE
05/01/2011

LABORATORY DIRECTOR
ARUN E MASIH

EXPIRATION DATE
04/30/2013

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Division of Laboratory Services
Survey and Certification Group
Center for Medicaid and State Operations

752 Certs1_040211

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