

CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF WAIVER

LABORATORY NAME AND ADDRESS

BLOOD ASSURANCE WEST END DBA OURCEL SOLUNTIONS
2817 WEST END AVE, SUITE 200
NASHVILLE, TN, 37203

CLIA ID NUMBER

44D2279617

EFFECTIVE DATE

04/05/2023

LABORATORY DIRECTOR

ELIZABETH CULLER

EXPIRATION DATE

04/04/2025

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 blue ink, appearing to read 'Gregg Brandush', is written over a faint, large watermark of the Department of Health and Human Services eagle.

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

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.