

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

LABORATORY NAME AND ADDRESS
NEUROVATIONS
3416 VALLE VERDE DR
NAPA, CA 94558

CLIA ID NUMBER
05D2048468

EFFECTIVE DATE
08/28/2017

LABORATORY DIRECTOR
KENNETH W MUELLER Ph.D.

EXPIRATION DATE
08/27/2019

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 black ink that reads 'Karen W. Dyer'. The signature is written in a cursive style with a large initial 'K' and 'D'.

Karen W. Dyer, Acting Director
Division of Laboratory Services
Survey and Certification Group
Center for Clinical Standards and Quality