

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

LABORATORY NAME AND ADDRESS  
IGENOMIX USA INC  
383 VAN NESS AVE UNIT 1605  
TORRANCE, CA 90501

CLIA ID NUMBER  
05D2172348

EFFECTIVE DATE  
06/04/2022

LABORATORY DIRECTOR  
BRYNN LEVY Ph.D.

EXPIRATION DATE  
06/03/2024

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

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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)	06/04/2020		
ROUTINE CHEMISTRY (310)	06/04/2020		



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.

**CLIA ID Number: 05D2172348**

IGENOMIX USA INC  
383 VAN NESS AVE UNIT 1605  
TORRANCE, CA 90501

**STATE AGENCY ADDRESS AND PHONE NUMBER:**

CA DHS/LABORATORY FIELD SERVICES  
DIVISION OF LABORATORY SCIENCE  
320 WEST 4TH STREET SUITE 890  
LOS ANGELES, CA 90013-2398  
(213)620-6160

**LABORATORY MAILING ADDRESS:**