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

LABORATORY NAME AND ADDRESS
NATIONAL MEDICAL SERVICES INC
D/B/A NMS LABS
3701 WELSH ROAD
WILLOW GROVE, PA 19090

CLIA ID NUMBER
39D0197898

EFFECTIVE DATE
05/08/2018

LABORATORY DIRECTOR
ROBERT A MIDDLEBERG Ph.D.

EXPIRATION DATE
05/07/2020

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.

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

<table>
<thead>
<tr>
<th>LAB CERTIFICATION (CODE)</th>
<th>EFFECTIVE DATE</th>
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<tr>
<td>GENERAL IMMUNOLOGY (220)</td>
<td>09/17/2003</td>
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<td>ROUTINE CHEMISTRY (310)</td>
<td>03/29/2003</td>
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<td>ENDOCRINOLOGY (330)</td>
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<td>TOXICOLOGY (340)</td>
<td>03/29/2003</td>
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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: 39D0197898
NATIONAL MEDICAL SERVICES INC
D/B/A NMS LABS
3701 WELSH ROAD
WILLOW GROVE, PA 19090

STATE AGENCY ADDRESS AND PHONE NUMBER:

Pennsylvania Department of Health
Bureau of Laboratories
110 Pickering Way
Exton, PA 19341
(610)280-3464

LABORATORY MAILING ADDRESS:
00504A  
ROBERT A MIDDLEBERG, PH.D.  
NATIONAL MED SERVICES INC-DBA/NMS LABS  
200 WELSH ROAD  
HORSHAM, PA  19044

Dear Dr. Middleberg:

Your request to make changes to your facility has been received in this office.

The following change(s) has been made to your CLIA Certification and/or Clinical Laboratory Permit:

[ ] Addition/Correction of federal Tax ID number/Owner  
[ ] Facility name change  
[X] Facility address change/correction (Physical, Mailing, & Billing)  
[ ] Change of Director  
[ ] Facility Closed  
[X] Other (Contact Info)

Remember, you will receive an updated Clinical Laboratory Permit closer to expiration. Also, the Centers for Medicare and Medicaid Services (CMS/CLIA) DOES NOT re-issue certificates due to address, name, and director changes, lost or misplaced certificates. Any changes made will reflect on your next two-year certificate.

We encourage your laboratory to maintain compliance with all CLIA and State regulations. The director shall be responsible for the proper performance of all tests in the laboratory and the continuous application of quality control procedures to the work in accordance with recommendations and directives of the Department (Title 28 Chapter 5).

If we can be of any further assistance to you in the future, do not hesitate to contact us.

Sincerely,

[Signature]

Pamela Groff, Administrative Assistant  
Division of Laboratory Improvement  
(484) 870-6425  
pgroff@pa.gov