

CENTERS FOR MEDICARE & MEDICAID SERVICES  
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

*CERTIFICATE OF ACCREDITATION*

LABORATORY NAME AND ADDRESS

LOUISIANA COAGULATION  
A DIVISION OF MACHAON DIAGNOSTICS  
8721 OAK STREET  
NEW ORLEANS, LA 70118

CLIA ID NUMBER

19D2119300

EFFECTIVE DATE

03/11/2022

EXPIRATION DATE

03/10/2024

LABORATORY DIRECTOR

GLORIA B COKER M.D.

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 "Regina S. Van Brakle".

Regina S. Van Brakle, Acting Director  
Division of Laboratory Services  
Survey and Certification Group  
Center for Clinical Standards and Quality