

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

CUA ID NUMBER
19D2119300

EFFECTIVE DATE
03/11/2024

LABORATORY DIRECTOR
GLORIA B COKER M.D.

EXPIRATION DATE
03/10/2026

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.



Division of Clinical Laboratory Improvement & Quality
Quality & Safety Oversight Group
Center for Clinical Standards and Quality