

CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS
CARLE HEALTH METHODIST HOSPITAL
METHODIST LAB - DANA SPEARS
221 NE GLEN OAK AVE
PEORIA, IL 61636

CLIA ID NUMBER
14D0431854

EFFECTIVE DATE
02/28/2025

LABORATORY DIRECTOR
DR. ELIZABETH A. BAUER-MARSH

EXPIRATION DATE
02/27/2027

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 herein (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.



Gregg Brandush, Director
Division of Clinical Laboratory Improvement & Quality
Quality & Safety Oversight Group
Center for Clinical Standards and Quality