



COLLEGE of AMERICAN
PATHOLOGISTS



The College of American Pathologists
certifies that the laboratory named below

**Highlands Pathology Consultants PC
Kingsport Branch Laboratory
Kingsport, Tennessee
Evan L. Kulbacki, MD**

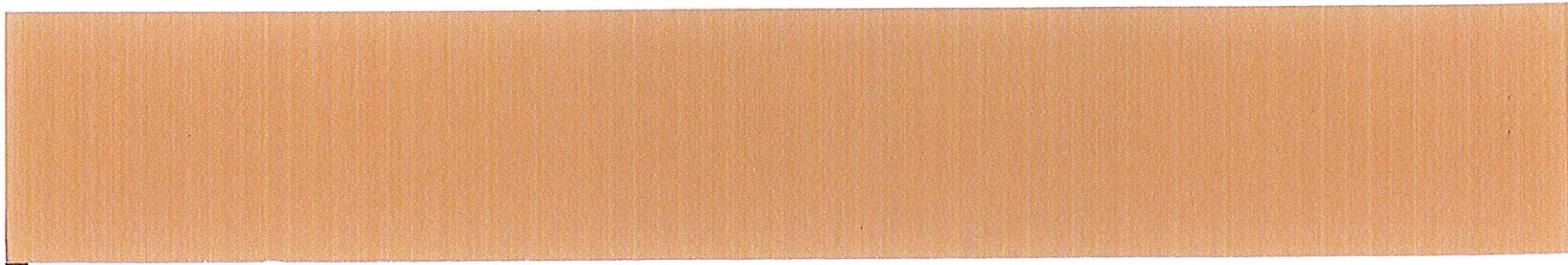
CAP Number: 7023701
AU-ID: 1202607
CLIA Number: 44D0954958

has met all applicable standards for accreditation and is hereby accredited by the
College of American Pathologists' Laboratory Accreditation Program. Reinspection
should occur prior to November 30, 2019 to maintain accreditation.

Accreditation does not automatically survive a change in director, ownership,
or location and assumes that all interim requirements are met.

Chair, Commission on Laboratory Accreditation

President, College of American Pathologists



State of Tennessee



License No. 000003354

DEPARTMENT OF HEALTH

This Is To Certify, that a license is hereby granted by the Tennessee Department of Health to:

HIGHLANDS PATHOLOGY CONSULTANTS,P.C.

Medical Laboratory Director EVAN L. KULBACKI, M.D.

Owner CORPORATION

To conduct and maintain a Medical Laboratory in the Specialty (ies) of:

HISTOPATHOLOGY
CYTOLOGY
ORAL PATHOLOGY
MOLECULAR DIAGNOSTICS

On the premises located at 130 W RAVINE RD, KINGSPORT, TN 37660-3837

County of SULLIVAN

This license shall expire APRIL 30 2019

This license shall be displayed in a conspicuous place where it may be viewed by the public. The holder of this license is subject to the provisions of T.C.A. Section 68-29-111 and regulations thereto. This license shall not be assignable or transferable and shall be subject to revocation at any time by the State Department of Health for failure to comply with the laws of the State of Tennessee or the rules and regulations of the State Department of Health issued thereunder.

In Witness Whereof, we have hereunto set our hand and seal of the State
this 12TH *day of* APRIL 2018.

By Roemarie OHO
DIRECTOR, HEALTH RELATED BOARDS

By Passi A. Walter MHA, MT (ASCP)
CHAIRMAN, MEDICAL LABORATORY BOARD

By [Signature]
COMMISSIONER, DEPARTMENT OF HEALTH



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

LABORATORY NAME AND ADDRESS
HIGHLANDS PATHOLOGY CONSULTANTS PC
130 WEST RAVINE ROAD
KINGSPORT, TN 37660

CLIA ID NUMBER
44D0954958

EFFECTIVE DATE
02/28/2018

LABORATORY DIRECTOR
EVAN L. KULBACKI M.D.

EXPIRATION DATE
02/28/2020

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