



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

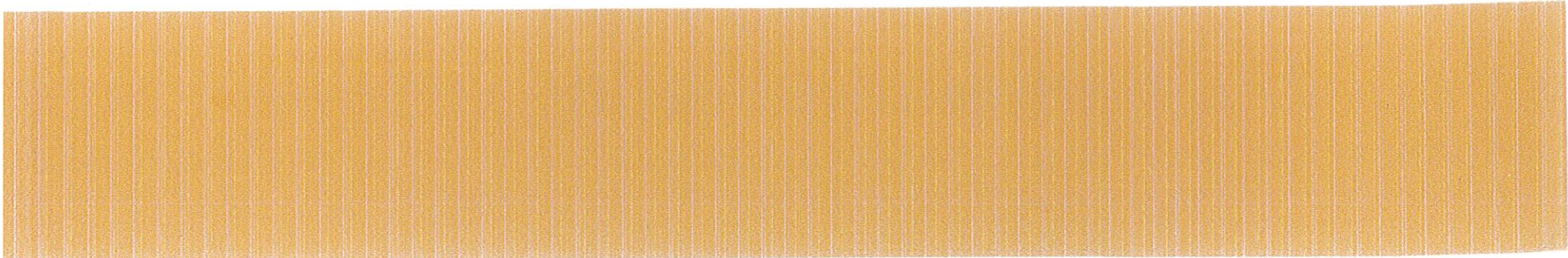
CLIA Number: 44D0954958

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, 2021 to maintain accreditation.

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

Chair, Accreditation Committee

President, College of American Pathologists



State of Tennessee



License No. 0000003354

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 2022

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 30TH *day of* APRIL 2021



By B+C
ASSISTANT COMMISSIONER, HEALTH LICENSURE & REGULATION

By Michael G. [Signature], M.D. (M.S.C.P.)
CHAIRMAN, MEDICAL LABORATORY BOARD

By Rosa [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
02/29/2020

LABORATORY DIRECTOR
EVAN L. KULBACKI M.D.

EXPIRATION DATE
02/27/2022

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, Director
Division of Laboratory Services
Survey and Certification Group
Center for Clinical Standards and Quality

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If you currently hold a Certificate of Compliance or Certificate of Accreditation, below is a list of the laboratory specialties/subspecialties you are certified to perform and their effective date: