



COLLEGE of AMERICAN  
PATHOLOGISTS

# CERTIFICATE OF ACCREDITATION

**Highlands Pathology Consultants P C**  
**Bristol Reg Med Ctr Lab**  
**Bristol, Tennessee**  
**Michael W. Rentz, MD**

CAP Number: 7182641  
AU-ID: 1397354  
CLIA Number: 44D1007975

The organization named above meets all applicable standards for accreditation and is hereby accredited by the College of American Pathologists' Laboratory Accreditation Program. Reinspection should occur prior to **March 13, 2025** to maintain accreditation.

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

Kathleen G. Beavis, MD, Accreditation Committee Chair

Emily Volk, MD, FCAP, President, College of American Pathologists



# State of Tennessee



License No. 0000004131

## DEPARTMENT OF HEALTH

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

HIGHLANDS PATHOLOGY CONSULTANTS, PC

*Medical Laboratory Director* MICHAEL W. RENTZ, M.D.

*Ownership Type* CORPORATION

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

CYTOLOGY  
HISTOPATHOLOGY  
ORAL PATHOLOGY  
CYTOLOGY (NON-GYN)

*On the premises located at* 1 MEDICAL PARK BLVD STE G 50, BRISTOL, TN 37620-7460

*County of* SULLIVAN

*This license shall expire* APRIL 30 2024

*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* 27TH *day of* FEBRUARY 2023.

*By* Jennifer L. Rotman, Esq  
ASSISTANT COMMISSIONER, HEALTH LICENSURE & REGULATION

*By* Jennifer Didcomb 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  
AT BRISTOL REGIONAL MEDICAL CENTER  
#1 MEDICAL PARK BLVD STE G50  
BRISTOL, TN 37620

**CLIA ID NUMBER**  
44D1007975

**EFFECTIVE DATE**

02/10/2022

**EXPIRATION DATE**

02/09/2024

**LABORATORY DIRECTOR**

MICHAEL W RENTZ 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.



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

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: