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

LABORATORY NAME AND ADDRESS **GUARDANT HEALTH** 505 PENOBSCOT DR REDWOOD CITY, CA 94063

CLIA ID NUMBER 05D2070300

EFFECTIVE DATE

08/28/2024

EXPIRATION DATE

08/27/2026

LABORATORY DIRECTOR

MARTINA LEFTEROVA 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. EPARTMEN

Monigue x

Monique Spruill, Director Division of Clinical Laboratory Improvement & Quality

Quality & Safety Oversight 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:

LAB CERTIFICATION (CODE)

EFFECTIVE DATE

LAB CERTIFICATION (CODE)

EFFECTIVE DATE

ROUTINE CHEMISTRY (310)

08/28/2014





FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.GOV/CLIA OR CONTACT YOUR LOCAL STATE AGENCY. PLEASE SEE THE REVERSE FOR YOUR STATE AGENCY'S ADDRESS AND PHONE NUMBER. PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE. CLIA ID Number: 05D2070300 GUARDANT HEALTH 505 PENOBSCOT DR REDWOOD CITY, CA 94063

STATE AGENCY ADDRESS AND PHONE NUMBER: CA DHS/LABORATORY FIELD SERVICES DIVISION OF LABORATORY SCIENCE 320 WEST 4TH STREET SUITE 890 LOS ANGELES, CA 90013-2398 (213)620-6160

LABORATORY MAILING ADDRESS: