

# CERTIFICATE OF ACCREDITATION

INTERSOCIETAL ACCREDITATION COMMISSION  
ECHOCARDIOGRAPHY | ICAEL

*hereby recognizes*

**ALLEN COUNTY CARDIOLOGY**  
604 WEST BERRY STREET  
FORT WAYNE, IN

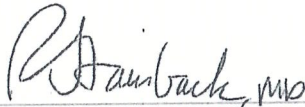
*as an*

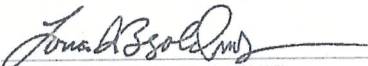
**ACCREDITED FACILITY**

*in the area(s) of*

**ADULT TRANSTHORACIC ECHOCARDIOGRAPHY**



  
\_\_\_\_\_  
PRESIDENT, ECHOCARDIOGRAPHY | ICAEL

  
\_\_\_\_\_  
SECRETARY, ECHOCARDIOGRAPHY | ICAEL

*through the date of*           MARCH 31, 2013