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

LABORATORY NAME AND ADDRESS
DUKE HOSPITAL TRANSFUSION SERVICE
RM 1720 DUKE HOSPITAL NORTH ERWIN ROAD
DURHAM, NC 27710

CLIA ID NUMBER
34D2064631

EFFECTIVE DATE
10/23/2017

LABORATORY DIRECTOR
NICHOLAS BANDARENKO M.D.

EXPIRATION DATE
10/22/2019

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
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:

<table>
<thead>
<tr>
<th>LAB CERTIFICATION (CODE)</th>
<th>EFFECTIVE DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>BACTERIOLOGY (110)</td>
<td>07/28/2015</td>
</tr>
<tr>
<td>GENERAL IMMUNOLOGY (220)</td>
<td>11/09/2015</td>
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<tr>
<td>ABO &amp; RH GROUP (510)</td>
<td>10/23/2013</td>
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<tr>
<td>ANTIBODY TRANSFUSION (520)</td>
<td>10/23/2013</td>
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<tr>
<td>ANTIBODY NON-TRANSFUSION (530)</td>
<td>10/23/2013</td>
</tr>
<tr>
<td>ANTIBODY IDENTIFICATION (540)</td>
<td>10/23/2013</td>
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<tr>
<td>COMPATIBILITY TESTING (550)</td>
<td>10/23/2013</td>
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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.