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

10/23/2025

EXPIRATION DATE

10/22/2027

LABORATORY DIRECTOR DR. NICHOLAS BANDARENKO

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.



Gregg Brandush, Director

Division of Clinical Laboratory Improvement & Quality

EFFECTIVE DATE

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) LAB CERTIFICATION (CODE) EFFECTIVE DATE DIAGNOSTIC IMMUNOLOGY - GENERAL IMMUNOLOGY (220) 11/09/2015 IMMUNOHEMATOLOGY - ABO GROUP & RH TYPE (510) 10/23/2013 IMMUNOHEMATOLOGY - ANTIBODY DETECTION (TRANSFUSION) (520) 10/23/2013 IMMUNOHEMATOLOGY - ANTIBODY DETECTION (NON-TRANSFUSION) (530) 10/23/2013

10/23/2013

IMMUNOHEMATOLOGY - COMPATIBILITY TESTING (550) 10/23/2013

IMMUNOHEMATOLOGY - ANTIBODY IDENTIFICATION (540)