

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

LABORATORY NAME AND ADDRESS
DONOR TESTING LAB
1625 ROCK MOUNTAIN BOULEVARD
STONE MOUNTAIN, GA 30083

CLIA ID NUMBER
11D2166017

EFFECTIVE DATE

03/02/2020

EXPIRATION DATE

03/01/2022

LABORATORY DIRECTOR
CHRISTOPHER LOUGH 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.



Karen W. Dyer
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:

<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>	<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>
VIROLOGY (140)	03/02/2020		
SYPHILIS SEROLOGY (210)	03/02/2020		
GENERAL IMMUNOLOGY (220)	03/02/2020		
ROUTINE CHEMISTRY (310)	03/02/2020		
ABO & RH GROUP (510)	03/02/2020		
ANTIBODY TRANSFUSION (520)	03/02/2020		
ANTIBODY NON-TRANSFUSION (530)	03/02/2020		
ANTIBODY IDENTIFICATION (540)	03/02/2020		

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.