CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

AUGUSTA UNIVERSITY HEMOGLOBINOPATHY LABORATORY 989 ST SEBASTIAN WAY EF-201 AUGUSTA, GA 30912

LABORATORY DIRECTOR

ABDULLAH KUTLAR M.D.

CLIA ID NUMBER

11D0912447

EFFECTIVE DATE

11/23/2022

EXPIRATION DATE

11/22/2024

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.



Monique Spruill, Director

Division of Clinical Laboratory Improvement & Quality

Quality & Safety Oversight Group

Center for Clinical Standards and Quality

92 Certs2_102522

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

HISTOCOMPATIBILTY (010) 03/05/2014

ROUTINE CHEMISTRY (310) 05/06/1998

HEMATOLOGY (400) 11/23/1996

CYTOGENETICS (900) 03/05/2014



LAB CERTIFICATION (CODE)

EFFECTIVE DATE



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.