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

LABORATORY NAME AND ADDRESS
NATIONAL BLOOD TESTING PARTNERS
DONOR TESTING LABORATORY
1625 ROCK MOUNTAIN BOULEVARD SUITE R
STONE MOUNTAIN, GA 30083

LABORATORY DIRECTOR

RONI J BOLLAG M.D.

CLIA ID NUMBER 11D2166017

EFFECTIVE DATE

03/02/2024

EXPIRATION DATE

03/01/2026

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

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

PARASITOLOGY (130) 09/04/2021 VIROLOGY (140) 03/02/2020 SYPHILIS SEROLOGY (210) 03/02/2020 GENERAL IMMUNOLOGY (220) 03/02/2020 **ROUTINE CHEMISTRY (310)** 03/02/2020 03/02/2020 ABO & RH GROUP (510) ANTIBODY TRANSFUSION (520) 03/02/2020 ANTIBODY NON-TRANSFUSION (530) 03/02/2020 ANTIBODY IDENTIFICATION (540) 03/02/2020 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.