

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

LABORATORY NAME AND ADDRESS	CLIA ID NUMBER
HOXWORTH BLOOD CENTER 3130 HIGHLAND AVENUE ML055 CINCINNATI, OH 45267	36D0346846
LABORATORY DIRECTOR	EFFECTIVE DATE
PATRICIA M CAREY M.D.	10/20/2014
	EXPIRATION DATE
	10/19/2016

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 herein (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.



Judith A. Yost
 Judith A. Yost, Director
 Division of Laboratory Services
 Survey and Certification Group
 Center for Clinical Standards and Quality

198 CMS2_092314

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	LAB CERTIFICATION (CODE)	EFFECTIVE DATE
HISTOCOMPATIBILITY (010)	02/08/2002		
HEMATOLOGY (400)	03/02/2007		
ABO & RH GROUP (510)	08/31/1996		
ANTIBODY TRANSFUSION (520)	08/31/1996		
ANTIBODY NON-TRANSFUSION (530)	05/02/2007		
ANTIBODY IDENTIFICATION (540)	08/31/1996		

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.