

CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

BLOOD BANK OF DELMARVA, INC
100 HYGEIA DRIVE
NEWARK, DE 19713

LABORATORY DIRECTOR

SCOTT HALL MD

CLIA ID NUMBER

08D0644842

EFFECTIVE DATE

07/27/2011

EXPIRATION DATE

07/26/2013

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.



Judith A. Yost

Judith A. Yost, Director
Division of Laboratory Services
Survey and Certification Group
Center for Medicaid and State Operations

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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>
BACTERIOLOGY (110)	03/01/2004		
SYPHILIS SEROLOGY (210)	07/27/1995		
GENERAL IMMUNOLOGY (220)	01/15/2004		
ROUTINE CHEMISTRY (310)	10/01/2007		
HEMATOLOGY (400)	07/27/1995		
ABO & RH GROUP (510)	07/27/1995		
ANTIBODY TRANSFUSION (520)	07/27/1995		
ANTIBODY NON-TRANSFUSION (530)	07/27/1995		
ANTIBODY IDENTIFICATION (540)	07/27/1995		

CMS
CENTERS for MEDICARE & MEDICAID SERVICES



FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.HHS.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.