

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

LABORATORY NAME AND ADDRESS
WFUHS HLA/IMMUNOGENETICS LABORATORY
145 KIMEL PARK DRIVE, SUITE 250
WINSTON-SALEM, NC 27103

CLIA ID NUMBER
34D0655039

EFFECTIVE DATE
10/20/2022

LABORATORY DIRECTOR
MICHAEL D GAUTREAUX PHD, ABHI

EXPIRATION DATE
10/19/2024

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.



Manique Spruill
 Manique Spruill, Director
 Division of Clinical Laboratory Improvement & Quality
 Quality & Safety Oversight Group
 Center for Clinical Standards and Quality

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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>
HISTOCOMPATIBILTY (010)	01/22/2002		



**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.**

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STATE AGENCY ADDRESS AND PHONE NUMBER:
NC DEPT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH FACILITIES/CLIA CERTIFICATION
2713 MAIL SERVICE CENTER
RALEIGH, NC 27699-2713
(919)855-4620

LABORATORY MAILING ADDRESS: