

**CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS**

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

VITALANT TRANSF SVCS - U I H
1740 W TAYLOR ST
CHICAGO, IL 60612

CLIA ID NUMBER

14D2070396

EFFECTIVE DATE

05/27/2025

LABORATORY DIRECTOR

SALLY CAMPBELL-LEE

EXPIRATION DATE

05/26/2027

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.



Gregg Brandush, 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	LAB CERTIFICATION (CODE)	EFFECTIVE DATE
HEMATOLOGY (400)	03/04/2024		
IMMUNOHEMATOLOGY - ABO GROUP & RH TYPE (510)	05/27/2015		
IMMUNOHEMATOLOGY - ANTIBODY DETECTION (TRANSFUSION) (520)	05/27/2015		
IMMUNOHEMATOLOGY - ANTIBODY DETECTION (NON-TRANSFUSION) (530)	06/25/2019		
IMMUNOHEMATOLOGY - ANTIBODY IDENTIFICATION (540)	05/27/2015		
IMMUNOHEMATOLOGY - COMPATIBILITY TESTING (550)	05/27/2015		

**PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.
FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.GOV/CLIA.**