CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

CARTER BLOOD CARE 2205 HWY 121 BEDFORD, TX 76021 CLIA ID NUMBER

45D0486046

EFFECTIVE DATE

07/27/2025

LABORATORY DIRECTOR

DR. BARBARA J. BRYANT

EXPIRATION DATE

07/26/2027

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.



LAB CERTIFICATION (CODE)

IMMUNOHEMATOLOGY - ANTIBODY IDENTIFICATION (540)

IMMUNOHEMATOLOGY - COMPATIBILITY TESTING (550)

Gregg Brandush, Director

LAB CERTIFICATION (CODE)

Division of Clinical Laboratory Improvement & Quality

EFFECTIVE DATE

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:

EFFECTIVE DATE

07/27/1995

07/27/1995

 MICROBIOLOGY - BACTERIOLOGY (110)
 03/01/2004

 DIAGNOSTIC IMMUNOLOGY - GENERAL IMMUNOLOGY (220)
 04/12/2022

 CHEMISTRY - ROUTINE CHEMISTRY (310)
 02/21/2023

 IMMUNOHEMATOLOGY - ABO GROUP & RH TYPE (510)
 07/27/1995

 IMMUNOHEMATOLOGY - ANTIBODY DETECTION (TRANSFUSION) (520)
 07/27/1995

 IMMUNOHEMATOLOGY - ANTIBODY DETECTION (NON-TRANSFUSION) (530)
 01/16/2002