

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

LABORATORY NAME AND ADDRESS
 FLAGSHIP BIOSCIENCES, INC
 133 SOUTHCENTER COURT SUITE 400
 MORRISVILLE, NC 27560

CLIA ID NUMBER
 31D1038733

EFFECTIVE DATE
 03/15/2023

LABORATORY DIRECTOR
 KEN YOUNG M.D.

EXPIRATION DATE
 03/14/2025

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.



Monique Spruill
 Monique 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>
HISTOCOMPATIBILITY (010)	02/19/2021
GENERAL IMMUNOLOGY (220)	04/01/2009
ROUTINE CHEMISTRY (310)	02/21/2012
HISTOPATHOLOGY (610)	02/18/2010
CYTOGENETICS (900)	03/15/2007

LAB CERTIFICATION (CODE) EFFECTIVE DATE



**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.