



KENYA ACCREDITATION SERVICE

P. O. Box 47400-00100, TEL. +254-787-395679, +254-725-227640 Nairobi, Kenya
Email: info@kenyaaccreditation.org Web: www.kenas.go.ke

SCHEDULE OF ACCREDITATION

KILIFI COUNTY REFERRAL HOSPITAL LABORATORY

ISO 15189:2012

Medical Laboratory Number: **KENAS/ML/82**

Date of Accreditation: **05-MAR-2020**

PERMANENT ADDRESS OF LABORATORY

Kilifi County Referral Hospital
P. O. BOX 09-80108,
Kilifi, Kenya
Tel: +254 722 866 293; +254 726 841 775; +254 947 307
Email: kilificalityhospital@yahoo.com

Laboratory Director:

Dr. Eddy Nzomo

Nominate Representative

Jambo Mwasambu Juma Seif

Date of Expiry: 04-MAR-2024

Approved by: _____

J. Kelly P.
KENAS CEO/Authorized Representative

Date: 05-MAR-2020

[Signature]
2020-03-05



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SCHEDULE OF ACCREDITATION

No.	Medical field	Examination technique	Equipment	Specimen	Components / analyte	Test Location
1	Microbiology–mycobacteriology	Fluorescent Microscopy	Fluorescent Microscope	Sputum	Mycobacterium tuberculosis - Acid Fast Bacilli (AFB)	
	Microbiology – mycobacteriology (Molecular Biology)	Polymerase chain reaction (PCR)	Gene xpert	Sputum and other body fluids	Mycobacterium tuberculosis, Rifabacin drug Resistance/sensitivity	
2	Immunology	Flow cytometry	BD FACS Presto	Blood	CD4 Absolute C4%	
3	Haematology	Electrical impedance	Medonic series	Whole Blood	RBC WBC PLT HB HCT MCV	
4	Biochemistry	Spectrophotometry	Fujifilm NX 500i	Serum	UEC GPT GOT B. Direct B. Total	

Original Date of Accreditation: 05-MAR-2020

This schedule is issued subject to the terms and conditions of KENAS Accreditation. It supersedes any other schedule(s) issued in the past.

Approved by: _____

KENAS CEO/Authorized Representative

Date: 05-MAR-2020


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