



**KENYA ACCREDITATION SERVICE**

P. O. Box 47400-00100, TEL. +254-787-395679, +254-725-227640 Nairobi, Kenya

Email: [info@kenas.go.ke](mailto:info@kenas.go.ke) Web: [www.kenas.go.ke](http://www.kenas.go.ke)

**SCHEDULE OF ACCREDITATION**

**MSAMBWENI COUNTY REFERRAL HOSPITAL LABORATORY**

**ISO 15189:2012**

Medical Laboratory Number: **KENAS/ML/109**

Date of Accreditation: **26-MAR-2020**

**PERMANENT ADDRESS OF LABORATORY**

Msambweni County Referral Hospital Laboratory

P.O.BOX 8-80404 Msambweni

Kwale, Kenya

Tel: + 254 020 2333760

Email: [msambwenihosp@gmail.com](mailto:msambwenihosp@gmail.com)

**Laboratory Director**

Juma Chimvua kombo

**Nominated Representative**

Ali Musa

**Date of Expiry: 25-MAR-2024**

Approved by: \_\_\_\_\_

*[Signature]*  
**KENAS CEO/Authorized Representative**

Date: 26-MAR-2020

*[Signature]*  
2020-03-26



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**SCHEDULE OF ACCREDITATION**

No.	Medical field	Examination technique	Equipment	Specimen	Components / analyte	Test Location
1	Microbiology- Mycobacteriology	Polymerase Chain Reaction (PCR)  Ziehl- Neelsen Staining	GENE XPRT  Fluorescent microscopy	Sputum	Mycobacterium tuberculosis, Rifabacin drug Resistance/sensitivity Mycobacterium tuberculosis - Acid Fast Bacilli (AFB)	Main Lab
2	Parasitology	Microscopy	Microscope	Whole Blood	Malaria parasite	
3	Immunology- serology	Immunochromatography	HIV Rapid Strip	Whole Blood/Serum/ Plasma	HIV antibodies	
4	Biochemistry	Automated-electrical impedance	Mindray BC 230	Serum	SGOT SGPT ALK Protein Albumin GGT Urea Creatinine	
5	Hematology	Electrical impedance	Mindray hematology analyzer bc-5000	EDTA whole blood	WBC RBC Platelets HCT MCV MCHC MCH HB	

**Original Date of Accreditation: 26-MAR-2020**

**This schedule is issued subject to the terms and conditions of KENAS Accreditation.**

Approved by:  Date: 26-MAR-2020  
**KENAS CEO/Authorized Representative**

  
 2020-03-26