

# **CERTIFICATE OF ACCREDITATION**

*In terms of section 22(2) (b) of the Accreditation for Conformity Assessment, Calibration and Good Laboratory Practice Act, 2006 (Act 19 of 2006), read with sections 23(1), (2) and (3) of the said Act, I hereby certify that:-*

## **RAKAI GENERAL HOSPITAL LABORATORY**

**Co. Reg. No.: N/A**  
**Practice No.:**

### **Rakai General Hospital Laboratory**

**Facility Accreditation Number: M0948**

is a South African National Accreditation System accredited facility  
provided that all conditions and requirements are complied with

This certificate is valid as per the scope as stated in the accompanying schedule of accreditation,  
Annexure "A", bearing the above accreditation number for

### **MEDICAL TESTING LABOIRATORY HAEMATOLOGY, IMMUNOLOGY, MYCOBACTERIOLOGY AND SEROLOGY**

The facility is accredited in accordance with the recognised International Standard

**ISO 15189:2022**

The accreditation demonstrates technical competency for a defined scope and the operation of a  
quality management system

While this certificate remains valid, the accredited facility named above is authorised to  
use the relevant accreditation symbol to issue facility reports and/or certificates

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**Mr F Osman**  
**Acting Chief Executive Officer**

**Effective Date: 25 August 2025**  
**Certificate Expires: 24 August 2029**

## ANNEXURE A

## SCHEDULE OF ACCREDITATION

Facility Number: **M0948****Permanent Address of Laboratory:**

Rakai General Hospital Laboratory  
 Rakai Masaka  
 0000  
 Uganda  
 Kampala  
 256

**Signatories:**

Signatories as authorised by the Head of Laboratory

**Postal Address:**

Same as above  
 Uganda  
 256

**Contact Person:**

Mr Alfred Odoi

**Tel:** (+256) 782379809**Issue No.:** 01**Fax:** n/a**Date of Issue:** 25 August 2025**E-mail:** rakaigeneralhospitallaboratory@gmail.com**Expiry Date:** 24 August 2029

Discipline / Sample Type	Type of Tests	Equipment / Method
<b>Haematology</b>		
Whole Blood	Malaria Antibodies & Antigen	Manual Method
<b>Immunology</b>		
Whole Blood	CD4 Abs Count	Facs Presto
<b>Serology</b>		
Serum	Cryptococcal Antigen (CrAg)	Manual Method
Serum	Hepatitis B Surface Ag	Manual Method
Whole Blood/Serum	HIV 1 & 2 Antibody	Manual Method
Serum	Syphilis Testing: TPA	Manual Method
<b>Mycobacteriology</b>		
Sputum	Ziehl Neelsen Stain	Manual Method

Original Date of Accreditation: 25 August 2025

ISSUED BY THE SOUTH AFRICAN NATIONAL ACCREDITATION SYSTEM

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Accreditation Manager