# The Commonwealth of Massachusetts

**DEPARTMENT OF** 

**PUBLIC HEALTH** 

### **DIVISION OF HEALTH CARE FACILITY LICENSURE AND CERTIFICATION**

## **CLINICAL LABORATORY LICENSE**

In accordance with the provisions of the General Laws, Chapter 111D and regulations established thereunder, a license is hereby granted to

QUEST DIAGNOSTICS, LLC

NAME OF APPLICANT

200 FOREST STREET 3RD FLOOR, MARLBOROUGH, MA 01752

ADDRESS OF APPLICANT

for the maintenance of

#### QUEST DIAGNOSTICS. LLC

NAME OF CLINICAL LABORATORY

### 200 FOREST STREET 3RD FLOOR, MARLBOROUGH, MA 01752

ADDRESS OF CLINICAL LABORATORY

Classification: FULL

MICROBIOLOGY Bacteriology Mycology Parasitology Virology Other Microbiology IMMUNOLOGY **Clinical Chemistry** Routine Chemistry Endocrinology Toxicology Urinalysis Other Chemistry

Hematology Routine Hematology Cellular Studies Coagulation Other HematologyRh Titiers

Immunohematology Blood Group/Rh Type Rh Titers Other Immunohematology

Pathology Diagnostic Cytology Histopathology

Oral Pathology

Cytogenetics

LICENSE Nº 5690 is valid from March 16, 2023 to March 15, 2025 subject to revocation for cause.

COLLECTION STATIONS/SATELLITES

Syphilis

Non-Syphilis

Viral Serology

None

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MARGRET R. COOKE, COMMISSIONER OF PUBLIC HEALTH MARCH 16. 2023 DATE ISSUED

POST CONSPICUOUSLY

5690 FACILITY NUMBER