

# 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 MASSACHUSETTS LLC

NAME OF APPLICANT

200 FOREST ST 3RD FLOOR, MARLBOROUGH, MA 01752

ADDRESS OF APPLICANT

for the maintenance of

QUEST DIAGNOSTICS MA LLC

NAME OF CLINICAL LABORATORY

200 FOREST ST 3RD FLOOR, MARLBOROUGH, MA 01752

ADDRESS OF CLINICAL LABORATORY

**5325**

FACILITY NUMBER

Classification: **FULL**

MICROBIOLOGY

Bacteriology  
Mycology  
Parasitology  
Virology  
Other Microbiology

IMMUNOLOGY

Syphilis  
Non-Syphilis  
Viral Serology

Clinical Chemistry

Routine Chemistry  
Endocrinology  
Toxicology  
Urinalysis  
Other Chemistry

Hematology

Routine Hematology  
Cellular Studies  
Coagulation  
Other Hematology/Rh  
Titers

Immunohematology

Blood Group/Rh  
Type  
Rh Titers  
Other  
Immunohematology

Pathology

Diagnostic Cytology  
Histopathology  
Oral Pathology

Cytogenetics

LICENSE N<sup>o</sup> **5325** is valid from **March 16, 2021** to **March 15, 2023** subject to revocation for cause.

COLLECTION STATIONS/SATELLITES

See Attached

Handwritten signature of Monica Bharel in blue ink.

MONICA BHAREL, MD MPH COMMISSIONER OF PUBLIC HEALTH

**MARCH 16, 2021**

DATE ISSUED

POST CONSPICUOUSLY