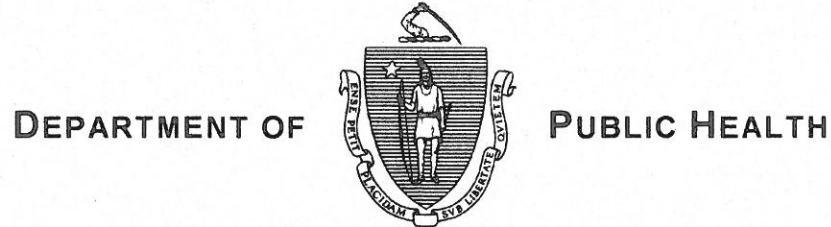


# The Commonwealth of Massachusetts



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

BOSTON HEART DIAGNOSTICS CORPORATION

NAME OF APPLICANT

200 CROSSING BLVD, FRAMINGHAM, MA 01702

ADDRESS OF APPLICANT

for the maintenance of

BOSTON HEART DIAGNOSTICS CORP

NAME OF CLINICAL LABORATORY

200 CROSSING BLVD, FRAMINGHAM, MA 01702

ADDRESS OF CLINICAL LABORATORY

5401

FACILITY NUMBER

Classification: FULL

IMMUNOLOGY  
Non-Syphilis

Clinical Chemistry  
Routine Chemistry  
Endocrinology

Hematology  
Routine Hematology  
Cellular Studies  
Coagulation

LICENSE N<sup>o</sup> 5401 is valid from November 18, 2017 to November 15, 2019 subject to revocation for cause.

This is a revised license that reflects updated subspecialty information.

COLLECTION STATIONS  
None

MONICA BHAREL, MD MPH COMMISSIONER OF PUBLIC HEALTH

NOVEMBER 18, 2017

DATE ISSUED

POST CONSPICUOUSLY