

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

BOSTON HEART DIAGNOSTICS CORP

NAME OF APPLICANT

200 CROSSING BLVD, FRAMINGHAM, MA

ADDRESS OF APPLICANT

for the maintenance of

BOSTON HEART DIAGNOSTICS CORP

NAME OF CLINICAL LABORATORY

200 CROSSING BLVD, FRAMINGHAM, MA

ADDRESS OF CLINICAL LABORATORY

5401

FACILITY NUMBER

Classification: FULL

IMMUNOLOGY
Non-Syphilis

CLINICAL CHEMISTRY
Routine Chemistry
Endocrinology

HEMATOLOGY
Coagulation

LICENSE N^o 5401 is valid from November 19, 2015 to November 17, 2017 subject to revocation for cause.

COLLECTION STATIONS
None

Handwritten signature of Monica Bharel.

MONICA BHAREL, MD MPH COMMISSIONER OF PUBLIC HEALTH

NOVEMBER 19, 2015

DATE ISSUED

POST CONSPICUOUSLY