

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

STRATA PATHOLOGY SERVICES INC

NAME OF APPLICANT

ONE CRANBERRY HILL, LEXINGTON, MA 02421

ADDRESS OF APPLICANT

for the maintenance of

STRATA PATHOLOGY SERVICES INC

NAME OF CLINICAL LABORATORY

ONE CRANBERRY HILL, LEXINGTON, MA 02421

ADDRESS OF CLINICAL LABORATORY

5174

FACILITY NUMBER

Classification:

MICROBIOLOGY

Bacteriology
Virology

Hematology

Other Hematology

Pathology

Diagnostic Cytology
Histopathology
Oral Pathology

LICENSE N^o **5174** is valid from March 5, 2017 to March 8, 2019 subject to revocation for cause.

COLLECTION STATIONS

None

MONICA BHAREL, MD MPH COMMISSIONER OF PUBLIC HEALTH

MARCH 5, 2017

DATE ISSUED

POST CONSPICUOUSLY

DPH-HCQ-CLP 10/14/17