



New Jersey Department of Health
 DIVISION OF PUBLIC HEALTH AND ENVIRONMENTAL LABORATORIES

CLINICAL LABORATORY LICENSE

No. 00052624



The following, pursuant to Chapter 166, P.L. of 1975, is hereby authorized to perform the below indicated services:

BIO-REFERENCE LABORATORIES INC - AT REGIONAL CANCER CARE ASSOCIATES
 1ST FLOOR
 92 SECOND ST
 HACKENSACK, NJ 07601

CLIS ID: 0006562
 Effective: 01/01/2019
 To: 12/31/2019

AUTHORIZED SERVICES			
<input type="checkbox"/> Urinalysis	<input type="checkbox"/> Mycology	<input checked="" type="checkbox"/> Chemistry	
<input type="checkbox"/> Bacteriology	<input type="checkbox"/> Class I	<input type="checkbox"/> Limited	
<input type="checkbox"/> Limited	<input type="checkbox"/> Class II	<input type="checkbox"/> Class III	
	<input type="checkbox"/> Class IV	<input type="checkbox"/> Class IV	
<input type="checkbox"/> Mycobacteriology	<input type="checkbox"/> Virology	<input type="checkbox"/> Endocrinology	
<input type="checkbox"/> Class I	<input type="checkbox"/> Diagnostic Immunology	<input type="checkbox"/> Toxicology	
<input type="checkbox"/> Class II	<input type="checkbox"/> Syphilis Serology	<input type="checkbox"/> Cytology	
<input type="checkbox"/> Class III	<input type="checkbox"/> General Immunology	<input type="checkbox"/> Collection Station Only	
<input type="checkbox"/> Class IV	<input checked="" type="checkbox"/> Hematology	<input type="checkbox"/> Cytogenetics and/or Tissue Typing	
<input type="checkbox"/> Parasitology	<input checked="" type="checkbox"/> Limited PT/INR, PTT	<input type="checkbox"/> Collection Station Performing Waived Tests Only	
<input type="checkbox"/> Limited	<input type="checkbox"/> Immunohematology	<input type="checkbox"/> Other	
	<input type="checkbox"/> Group and Type Only	<input type="checkbox"/> Limited	

TO BE CONSPICUOUSLY DISPLAYED AT LABORATORY

COMMISSIONER OF HEALTH