



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

CLINICAL LABORATORY LICENSE

No. **00047956**



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

BIO-REFERENCE LABORATORIES INC -
 481 EDWARD H. ROSS DR
 ELMWOOD PARK, NJ 07407

CLIS ID: 0000283
 Effective: 01/01/2018
 To: 12/31/2018

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