



GEORGIA DEPARTMENT OF
COMMUNITY HEALTH

STATE OF GEORGIA

CLINICAL LABORATORY LICENSE

This is to certify that a license is hereby granted to

EMORY HEALTHCARE, INC

(Name of Governing Body)

to maintain and operate a Clinical Laboratory located at

550 PEACHTREE STREET, N.E., STE 1255 D FISHER BLD; ATLANTA, GA 30308

(Address)

named as

EMORY UNIVERSITY HOSPITAL MIDTOWN - EML

(Name of Facility)

Pursuant to the terms of the Georgia Clinical Laboratory Licensure Law (Georgia Laws of 1970, p. 531 as amended), the above names facility is hereby licensed to function as a clinical laboratory, at address shown, for purposes of performing tests in the following categories or subcategories of procedures:

- CLINICAL CHEMISTRY- ROUTINE, URINALYSIS, BLOOD GASES / CO-OX, TOXICOLOGY (MEDICAL), TDM HEMATOLOGY
- IMMUNOHEMATOLOGY- GROUP, TYPE, CROSSMATCH, ANTIBODY SCREEN, IDENTIFICATION, TRANSFUSION SERVICES, COMPONENTS, STORAGE
- MICROBIOLOGY- BACTERIOLOGY I, PARASITOLOGY
- CLINICAL IMMUNOLOGY AND SEROLOGY- SYPHILIS, NON-SYPHILIS
- PATHOLOGY- EXFOLIATIVE CYTOLOGY, ANATOMIC PATHOLOGY, ORAL PATHOLOGY
- TISSUE BANKING-
- OTHER- SCREENING AND MONITORING
- POINT OF CARE TESTING- BLOOD GAS, AMNIOPH, CREATININE, FERN / KOH, ACT, INR

This license is effective through **March 31, 2020**, based on the laboratory's compliance status at date of regular issue, but is subject to revocation, suspension, or limitations for violations of the Act or the Regulations promulgated there-under. This license is not transferable and must be displayed in a prominent place.

Laboratory Director: **JEANNETTE GUARNER**

License number: **060-012**

GEORGIA DEPARTMENT OF COMMUNITY HEALTH

HEALTHCARE FACILITY REGULATION DIVISION

Melanie Simon, Division Chief