



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 March 31, 2019 and remains in effect unless revoked or suspended. This permit is granted pursuant to the authority vest in the Department of Community Health, official code of Georgia, Title 31, Chapter 5, and signifies that the provider complies with the Rules and Regulations of the Department of Community Health on the date this license was issued.

Laboratory Director: JEANNETTE GUARNER License number: 060-012

GEORGIA DEPARTMENT OF COMMUNITY HEALTH

This license is not transferable

HEALTHCARE FACILITY REGULATION DIVISION

Melanie Simon, Division Chief