

# 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

**BLUEPRINT GENETICS, INC. DBA ATHENA DIAGNOSTICS**

NAME OF APPLICANT

**200 FOREST ST, 2ND FLOOR, MARLBOROUGH, MA 01752**

ADDRESS OF APPLICANT

for the maintenance of

**ATHENA DIAGNOSTICS**

NAME OF CLINICAL LABORATORY

**200 FOREST ST, 2ND FLOOR, MARLBOROUGH, MA 01752**

ADDRESS OF CLINICAL LABORATORY

**5879**

FACILITY NUMBER

Classification: **FULL**

IMMUNOLOGY  
Non-Syphilis

Clinical Chemistry  
Other Chemistry

LICENSE N<sup>o</sup> **5879** is valid from **June 1, 2022** to **May 31, 2024** subject to revocation for cause.

COLLECTION STATIONS/SATELLITES  
None

Handwritten signature of Margaret R. Cooke in black ink.

MARGRET R. COOKE, COMMISSIONER OF PUBLIC HEALTH

**JUNE 1, 2022**

DATE ISSUED

POST CONSPICUOUSLY