



*State of Rhode Island and Providence Plantations*  
**DEPARTMENT OF HEALTH**  
*Center for Health Facilities Regulation*

*This is to certify that MAYO CLINIC LABORATORIES-ROCHESTER MAIN CAMPUS*  
*200 FIRST STREET SW ROCHESTER MN 55905*  
*License Number: LCO00255*

*is hereby authorized to conduct and maintain an Out of State Clinical Laboratory in conformity with RIGL C23-16.2 and the standards, rules and regulations prescribed thereunder. This license is subject to biennial renewal unless sooner suspended or revoked for cause. The name on this license is the common name under which the licensee does business and may not reflect the legal license holder. Please call (401) 222-2566 for more information.*

**APPROVED SPECIALTY (IES)**

*HISTOCOMPATIBILITY,*  
*MICROBIOLOGY, Bacteriology, Mycobacteriology, Mycology, Parasitology, Virology, DIAGNOSTIC IMMUNOLOGY, General Immunology,*  
*CHEMISTRY, Routine Chemistry, Urinalysis, Endocrinology, Toxicology, HEMATOLOGY,*  
*IMMUNOHEMATOLOGY, ABO Group/Rh Type, Antibody Det. Transfusion, Antibody Det. Non-Transfusion, Antibody Ident., Compat. Testing, PATHOLOGY,*  
*Histopathology, Oral Pathology, Cytology,*  
*CLINICAL GENETICS, Cytogenetics/FISH, Molecular Genetics, Biochemical Genetics, DNA-microarray*

A handwritten signature in black ink, appearing to read "Seema Dixit".

---

**Seema Dixit, MS, MPH**  
**Chief, Center for Health Facilities Regulations**

**Expires: 12/30/2018**

A handwritten signature in black ink, appearing to read "Nicole Alexander-Scott".

---

**Nicole Alexander-Scott, MD, MPH**  
**Director of Health**

**Issued: 04/10/1998**