State of California Department of Public Health

CLINICAL LABORATORY CERTIFICATE OF DEEMED STATUS

In accordance with the provisions of Chapter 3, Division 2 of the Business and Professions Code, the persons named below are hereby issued a certificate to operate a clinical laboratory at the indicated address or other site(s) on file with the department.

TRICORE REFERENCE LABORATORIES
1001 WOODWARD PLACE NE
ALBUQUERQUE NM 87102

OWNER(S):
TRICORE REFERENCE LABORATORIES

DIRECTOR(S):
MICHAEL J CROSSEY MD

LAB ID Number: CDS00800364
Effective Date: June 20, 2019
Valid Until: June 18, 2020
CLIA Number: 32D0534957

Robert J. Thomas, Chief Laboratory Field Services