

CLINICAL AND PUBLIC HEALTH LABORATORY LICENSE



named below are hereby issued a license authorizing operation of a clinical laboratory at the indicated address. In accordance with the provisions of Chapter 3, Division 2 of the Business and Professions Code, the persons

FRENCH HOSPITAL MEDICAL CENTER LABORATORY

SAN LUIS OBISPO, CA 93401-4131 1911 JOHNSON AVE



STATE ID: CDF-00002291
SCAN OR CODE TO VERIFY LICENSE
OR VISIT: www.cdph.ca.gov/LFS

EXPIRATION DATE: 02/26/2023 EFFECTIVE DATE: 02/27/2022

OWNER/S:

DIGNITY COMMUNITY CARE

LICENSE TYPE:

CLINICAL LABORATORY LICENSE

CLIA ID: 05D0586788

DIRECTOR/S:

FERGUSON, KEVIN, L

DISPLAY: State law requires that the clinical laboratory license shall be conspicuously posted in the clinical laboratory.

State law requires that the laboratory owner and/or the director notify this office within 30 days of any change in ownership, name, location, or laboratory directors. CHANGE OF LABORATORY NAME, DIRECTOR, OWNER AND/OR ADDRESS:

To make these changes or to submit a new application, visit our website: https://www.cdph.ca.gov/LFS (Go to Laboratory Facilities) If this office is not notified, your license may be revoked 30 days after major Owner and property thange DEEMED STATUS If your license is revoked, you must cease engaging in clinical laboratory practice and apply for a new laboratory license.

LABORATORY FIELD SERVICES ROBERT J. THOMAS BRANCH CHIEF · Thomas