



**NEW JERSEY DEPARTMENT OF HEALTH
DIVISION OF PUBLIC HEALTH & ENVIRONMENTAL
LABORATORIES**

CLINICAL LABORATORY IMPROVEMENT SERVICES

CLINICAL LABORATORY LICENSE



ESOTERIX GENETIC LABORATORIES, LLC

**3 FOREST PARKWAY
SHELTON, CT 06484**

The above, pursuant to Chapter 166, P.L. of 1975, is hereby authorized to perform the below indicated services:

DIAGNOSTIC IMMUNOLOGY

GENETICS AND/OR TISSUE TYPING

CLIS ID #: 45826
S/N #: 10002436
EFFECTIVE DATE: 12/09/2024
EXPIRATION DATE: 12/31/2025

**The laboratory is only authorized to perform the individual tests within the above specialties as registered with the Department as of the effective date of this license.
This license must be conspicuously displayed in the laboratory. License is not transferable.**



State of New Jersey
DEPARTMENT OF HEALTH
PO BOX 361
TRENTON, N.J. 08625-0361

PHILIP D. MURPHY
Governor

TAHESHA L. WAY
Lt. Governor

www.nj.gov/health

KAITLAN BASTON, MD, MSc, DFASAM
Commissioner

December 9, 2024

Jonathan Klein, MD
Laboratory Director
Esoterix Genetic Laboratories, LLC
3 Forest Parkway
Shelton, Connecticut 06484

Dear Dr. Klein:

The Clinical Laboratory Improvement Services (CLIS) is pleased to inform you that Esoterix Genetic Laboratories, LLC (CLIS ID# 45826) has been granted approval to perform those tests within the following Specialties for which validation studies and satisfactory proficiency testing data have been submitted for review, effective **December 9, 2024**:

Diagnostic Immunology: Flow Cytometry

Genetics and/or Tissue Typing: Cytogenetic Chromosome Analysis

Please be advised that if you wish to expand the test menu to include tests other than those tests listed in your initial application package, you must request such approval in writing to this office and document satisfactory performance in an approved proficiency program prior to patient testing.

Please retain this letter as documentation of approval to test. Enrollment in a CMS approved proficiency program is required to maintain licensure. If you have any questions or if we can be of any further assistance, you may contact me at 609-718-8081.

Sincerely,

A handwritten signature in blue ink that reads "Joan Mikita" followed by a stylized flourish.

Joan Mikita, MS
Manager, Clinical Laboratory Licensing Program
Clinical Laboratory Improvement Services
Public Health and Environmental Laboratories

Enclosure: State License