

LICENSE

In accordance with the provisions of Chapter RSA 151 and the regulations of said Department, a license is issued to

METABOLIC SOLUTIONS INC known as METABOLIC SOLUTIONS NH  
located at 460 AMHERST ST NASHUA NH  
to operate a(n) LABORATORY AND LAB SERVICES

This license is effective under the conditions and for the period stated in the annual certificate below:

LICENSE No 02731 Effective Date: 2/22/2000



STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF PROGRAM SUPPORT

EFFECTIVE DATE 3/1/2010  
EXPIRATION 2/28/2011

TOTAL BED  
COUNT 0

LICENSE NO: 02731 IS ISSUED TO METABOLIC SOLUTIONS INC  
DBA METABOLIC SOLUTIONS

THIS FACILITY HAS COMPLIED WITH RSA 151 AND THE RULES  
PROMULGATED THEREUNDER FOR LICENSURE AS THE  
FOLLOWING:

LOCATED AT 460 AMHERST STREE NASHUA NH  
TYPE ADMINISTRATOR  
LABORATORY AND LAB SERVICES DAVID A. WAGNER  
MEDICAL DIRECTOR WILLIAM E. OTTINGER  
LAB DIRECTOR  
BED TYPE 0  
BED 0

Comments ANNUAL CERTIFICATE  
LICENSED TO PERFORM CHEMISTRY

Waiver

*Mary R. Castelli*

Senior Division Director