



**STATE OF HAWAII  
DEPARTMENT OF HEALTH  
SUBSTANCE ABUSE TESTING LABORATORY LICENSE**

Pursuant to Chapter 329B, Hawaii Revised Statutes, and Title 11, Chapter 113,  
Hawaii Administrative Rules, this license is issued to:

**DIAGNOSTIC LABORATORY SERVICES, INC.**

Laboratory

99-859 Iwaiwa Street, Aiea, HI 96701

Address

Queen's Health Systems and Kuakini Medical Center

Owner(s)

for substance abuse testing in the State of Hawaii, subject to the following limitations:

Test Specimens: Urine; Blood (Alcohol only)  
Substances Tested and Approved Methodologies (Cutoff levels as per Hawaii Administrative Rules 11-113-18)

| <u>Substance</u>        | <u>Screening</u>                    |                          |                          | <u>Confirmatory</u>                 |                        |
|-------------------------|-------------------------------------|--------------------------|--------------------------|-------------------------------------|------------------------|
|                         | <u>EIA</u>                          | <u>RIA</u>               | <u>EPIA</u>              | <u>GC/MS</u>                        | <u>Other (specify)</u> |
| Marijuana .....         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                        |
| Cocaine .....           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                        |
| Amphetamines .....      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                        |
| Opiates .....           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                        |
| Phencyclidine .....     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                        |
| Barbiturates .....      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                        |
| Methaqualone .....      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                        |
| Benzodiazepines .....   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                        |
| Propoxyphene .....      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                        |
| Methadone .....         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                        |
| Alcohol (specify) ..... |                                     |                          | EMIT                     |                                     |                        |
| Others (specify) .....  |                                     |                          | N/A                      |                                     |                        |

This license is granted on the express condition that it may be suspended or revoked for any of the causes enumerated in Sections 11-113-9 or 11-113-10, Hawaii Administrative Rules.

Effective Date: January 15, 2019

License No.: SAT-L-003

Expiration Date: January 14, 2021

(for) DIRECTOR OF HEALTH