



**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, 2017

License No.: SAT-L-003

Expiration Date: January 14, 2019

(for) DIRECTOR OF HEALTH