

# CLINICAL LABORATORY PERMIT



**pennsylvania**  
DEPARTMENT OF HEALTH

*Pursuant to the act of September 26, 1951, P.L. 1539 as amended, a Permit to operate a Clinical Laboratory is hereby granted to:*

**Laboratory Identification Number: 22174A**

**Name and Director of Laboratory:**

**QUEST DIAGNOSTICS INCORPORATED  
IRINA MARAMICA, M.D. PH.D.  
33608 ORTEGA HIGHWAY  
SAN JUAN CAPISTRANO, CA 92690-6130**

**Owner:**

**QUEST DIAGNOSTICS INCORPORATED**

**ISSUE DATE: August 15, 2023**

**DATE EXPIRES: August 15, 2024**

**AUTHORIZED CATEGORIES/TESTS:**

**BACTERIOLOGY  
HEMATOLOGY  
MYCOLOGY  
NON-SYPHILIS SEROLOGY  
PARASITOLOGY  
SYPHILIS SEROLOGY  
TISSUE PATHOLOGY  
URINALYSIS  
VIROLOGY**

*Debra L. Bogen MD*

**Debra L. Bogen, MD, FAAP  
Secretary of Health**

**DISPLAY THIS CERTIFICATE PROMINENTLY**

**This permit is subject to revocation, suspension, or limitation for violation of the Act or the Regulations promulgated thereunder.**

**QUEST DIAGNOSTICS INCORPORATED  
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