

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: 23844A

AUTHORIZED CATEGORIES/TESTS:

EXFOLIATIVE CYTOLOGY

TISSUE PATHOLOGY

Name and Director of Laboratory:

**QUEST DIAGNOSTICS CLINICAL LABS INC
ANDREW S EDELMAN
800 BUSINESS CENTER DRIVE
HORSHAM, PA 19044**

Owner:

QUEST DIAGNOSTICS INCORPORATED

ISSUE DATE: August 15, 2020

DATE EXPIRES: August 15, 2021

**Rachel L. Levine, MD
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.