

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: 24996A AUTHORIZED CATEGORIES/TESTS: TISSUE PATHOLOGY

Name and Director of Laboratory:

INSTITUTE FOR DERMATOPATHOLOGY SUSANNE N. LEE 3805 WEST CHESTER PIKE BUILDING D SUITE 120 NEWTOWN SQUARE, PA 19073

Owner:

**QUEST DIAGNOSTICS** 

ISSUE DATE: August 15, 2023

**DATE EXPIRES: August 15, 2024** 

Debra L. Bogu 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.

