

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: 34779

AUTHORIZED CATEGORIES/TESTS:

Name and Director of Laboratory:

CLINICAL CHEMISTRY
HEMATOLOGY
NON-SYPHILIS SEROLOGY

BOSTON HEART DIAGNOSTICS CORP
HARI NAIR, PH.D.
200 CROSSING BLVD
FRAMINGHAM, MA 01702

Owner:

EUROFINS

ISSUE DATE: August 15, 2018

DATE EXPIRES: August 15, 2019

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.