

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, 2019

DATE EXPIRES: August 15, 2020

**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.