

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: 29131A

**AUTHORIZED CATEGORIES/TESTS:** 

TISSUE PATHOLOGY

Cytogenetics

Name and Director of Laboratory:

HNL GENOMICS KERRY K BROWN, PH.D. 6575 SNOWDRIFT ROAD, SUITE 106 ALLENTOWN, PA 18106

Owner:

HEALTH NETWORK LABORATORIES LP, DBA HNL LAB MEDICINE

ISSUE DATE: August 15, 2023

**DATE EXPIRES: August 15, 2024** 

Debra L. Boga MD

Debra L. Bogen, MD, FAAP Acting 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.