

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: 00694A

AUTHORIZED CATEGORIES/TESTS:

Name and Director of Laboratory:

BACTERIOLOGY

HEMATOLOGY

CBC

IMMUNOHEMATOLOGY

ITXM CLINICAL SERVICES-CTS
ALESIA KAPLAN
501 MARTINDALE STREET
PITTSBURGH, PA 15212

Owner:

ITXM CLINICAL SERVICES

ISSUE DATE: August 15, 2016

DATE EXPIRES: August 15, 2017

Karen M. Murphy Ph.D. RN
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.