

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, 2017

DATE EXPIRES: August 15, 2018

**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.