

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: 34080

Name and Director of Laboratory:

**S. TEXAS REFERENCE LABS DEPT OF PATHOLOGY
JOHN D OLSON, PH.D.
7703 FLOYD CURL DRIVE
SAN ANTONIO, TX 78229**

AUTHORIZED CATEGORIES/TESTS:

**CLINICAL CHEMISTRY
HEMATOLOGY
MYCOLOGY
NON-SYPHILIS SEROLOGY
TISSUE PATHOLOGY
VIROLOGY**

Owner:

STATE OF TX-UNIV OF TEXAS HEALTH SCIENCE CTR

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.

**S. TEXAS REFERENCE LABS DEPT OF PATHOLOGY
JOHN D OLSON, PH.D.
7703 FLOYD CURL DRIVE
SAN ANTONIO, TX 78229**