

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: 32073

AUTHORIZED CATEGORIES/TESTS:

Name and Director of Laboratory:

STANFORD CLINICAL LABORATORY AT HILLVIEW
CHRISTINA S. KONG, M.D.
3375 HILLVIEW AVENUE
PALO ALTO, CA 94304

BACTERIOLOGY
EXFOLIATIVE CYTOLOGY
 Non-Gynecological
NON-SYPHILIS SEROLOGY
PARASITOLOGY
SYPHILIS SEROLOGY
TISSUE PATHOLOGY
 Cytogenetics
VIROLOGY

Owner:

STANFORD HOSPITAL AND CLINICS

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.