

# 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: 32072**

**Name and Director of Laboratory:**

**STANFORD ANATOMIC PATH AND CLINICAL  
LABORATORIES  
CHRISTINA S. KONG, M.D.  
300 PASTEUR DRIVE - MC 5627  
STANFORD, CA 94305**

**Owner:**

**STANFORD HOSPITAL AND CLINICS**

**ISSUE DATE: August 15, 2024**

**DATE EXPIRES: August 15, 2025**

**AUTHORIZED CATEGORIES/TESTS:**

**BACTERIOLOGY  
CLINICAL CHEMISTRY  
HEMATOLOGY  
IMMUNOHEMATOLOGY  
NON-SYPHILIS SEROLOGY  
PARASITOLOGY  
TISSUE PATHOLOGY  
Cytogenetics  
VIROLOGY**

*Debra L. Bogen 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.**

**STANFORD ANATOMIC PATH AND CLINICAL LABORATORIES**  
**CHRISTINA S. KONG, M.D.**  
**3375 HILLVIEW AVENUE**  
**PALO ALTO, CA 94304**