

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: 21637A

Name and Director of Laboratory:

**DIANON SYSTEMS INC
JONATHAN L KLEIN, M.D.
1 FOREST PARKWAY
SHELTON, CT 06484**

AUTHORIZED CATEGORIES/TESTS:

**BACTERIOLOGY
CLINICAL CHEMISTRY
EXFOLIATIVE CYTOLOGY
NON-SYPHILIS SEROLOGY
TISSUE PATHOLOGY
VIROLOGY**

Owner:

LAB CORP OF AMERICA HOLDINGS

ISSUE DATE: August 15, 2024

DATE EXPIRES: August 15, 2025

Debra L. Bogen MD

**Debra L. Bogen, MD, FAAP
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.

**DIANON SYSTEMS INC
JONATHAN L KLEIN, M.D.
1 FOREST PARKWAY
SHELTON, CT 06484**