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: 034095

Name and Director of Laboratory:
HARBORVIEW MED CNTR, DEPT OF LAB MEDICINE
ROBERT W COOMBS, MD
325 9TH AVE, ROOM GWH-47
SEATTLE, WA 98104

AUTHORIZED CATEGORIES:
BACTERIOLOGY
CLINICAL CHEMISTRY
HEMATOLOGY
IMMUNOHEMATOLOGY
MYCOLOGY
NON-SYPHILIS SEROLOGY
PARASITOLOGY
URINALYSIS

Owner:
HARBORVIEW MEDICAL CENTER

ISSUE DATE: August 15, 2015
DATE EXPIRES: August 15, 2016

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.