

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: 032073



Name and Director of Laboratory:

STANFORD CLINICAL LABORATORY AT HILLVIEW
DANIEL A ARBER, MD
3375 HILLVIEW AVENUE
PALO ALTO, CA 94304

AUTHORIZED CATEGORIES:

BACTERIOLOGY
EXFOLIATIVE CYTOLOGY
NON-GYNECOLOGICAL
NON-SYPHILIS SEROLOGY
PARASITOLOGY
SYPHILIS SEROLOGY
TISSUE PATHOLOGY
CYTOGENETICS
VIROLOGY

Owner:

STANFORD HOSPITAL AND CLINICS

Issued: August 4, 2011

This permit is subject to revocation, suspension, or limitation for violation of the Act or the Regulations promulgated thereunder.

DATE EXPIRES: August 15, 2012

Eli N. Avila, MD, JD, MPH, FCLM
Secretary of Health

DISPLAY THIS CERTIFICATE PROMINENTLY