

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: 31877

AUTHORIZED CATEGORIES/TESTS:

Name and Director of Laboratory:

CLINICAL CHEMISTRY

**INTERPACE DIAGNOSTICS LABS INC.
SYDNEY D. FINKELSTEIN, M.D.
2 CHURCH STREET SOUTH SUITE B-05
NEW HAVEN, CT 06519**

Owner:

INTERPACE DIAGNOSTICS

ISSUE DATE: August 15, 2020

DATE EXPIRES: August 15, 2021

**Rachel L. Levine, MD
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.

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