THIS PERMIT IS SUBJECT TO REVOCATION, SUSPENSION, OR LIMITATION FOR VIOLATION OF THE ACT OR THE REGULATIONS PROMULGATED THEREUNDER.

Secretary of Health
Raphael L. Levine, M.D.

DATE EXPIRES: August 15, 2019
ISSUE DATE: August 15, 2018

Owner:

NASHVILLE, TN 37204
297 POSTER CRESCENT DRIVE
PAUL D. DICERANNA, M.D.

NAME AND DIRECTOR OF LABORATORY:

LABORATORY IDENTIFICATION NUMBER: 21174

Pursuant to the act of September 26, 1931, P.L. 1539 as amended, a Permit to operate a Clinical Laboratory is hereby granted to:

DEPARTMENT OF HEALTH
Pennsylvania

CLINICAL LABORATORY PERMIT