

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: 32377

AUTHORIZED CATEGORIES/TESTS:

EXFOLIATIVE CYTOLOGY

Non-Gynecological

Name and Director of Laboratory:

UCLA HEALTH SYSTEM CYTOGENETICS CENTER
LABORATORY
WAYNE W GRODY, M.D.
REHAB BUILDING ROOM 2-226, ATTN: LORI NORAVIAN
1000 VETERAN AVENUE
LOS ANGELES, CA 90024

Owner:

THE REGENTS OF THE UNIVERSITY OF CALIFORNIA

ISSUE DATE: August 15, 2017

DATE EXPIRES: August 15, 2018

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.