

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: 37228

AUTHORIZED CATEGORIES/TESTS:

Name and Director of Laboratory:

**CLINICAL CHEMISTRY
HEMATOLOGY
NON-SYPHILIS SEROLOGY**

**MACHAON DIAGNOSTICS, INC.
BRADLEY H. LEWIS, M.D.
3023 SUMMIT STREET
OAKLAND, CA 94609**

Owner:

MICHAEL ERO

ISSUE DATE: August 15, 2024

DATE EXPIRES: August 15, 2025

Debra L. Bogen MD

**Debra L. Bogen, MD, FAAP
Acting 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.

MACHAON DIAGNOSTICS, INC.
BRADLEY H. LEWIS, M.D.
3023 SUMMIT STREET
OAKLAND, CA 94609