

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: 09003A

Name and Director of Laboratory:

MAYO CLINIC LABS-ROCHESTER MAIN CAMPUS
WILLIAM G. MORICE II
200 FIRST STREET SW HILTON 530
ROCHESTER, MN 55905

Owner:

MAYO CLINIC

ISSUE DATE: August 15, 2019

DATE EXPIRES: August 15, 2020

AUTHORIZED CATEGORIES/TESTS:

BACTERIOLOGY
CLINICAL CHEMISTRY
EXFOLIATIVE CYTOLOGY
HEMATOLOGY
IMMUNOHEMATOLOGY
MYCOLOGY
NON-SYPHILIS SEROLOGY
PARASITOLOGY
TISSUE PATHOLOGY
URINALYSIS
VIROLOGY

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.