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: 00169A

Name and Director of Laboratory:

HEALTH NETWORK LABORATORIES
ELSIE S LEE, M.D.
1627 WEST CHEW STREET
ALLENTOWN, PA 18102

Owner:

HEALTH NETWORK LABORATORIES LP

ISSUE DATE: August 15, 2026

DATE EXPIRES: August 15, 2027

AUTHORIZED CATEGORIES/TESTS:

BACTERIOLOGY
Throat Screen [CLIA Waived]
CLINICAL CHEMISTRY
EXFOLIATIVE CYTOLOGY
HEMATOLOGY
CBC
Manual Differential of Atypical Cells
IMMUNOHEMATOLOGY
MYCOLOGY
NON-SYPHILIS SEROLOGY
PARASITOLOGY
Wet Mounts
TISSUE PATHOLOGY
TOXICOLOGY - ALCOHOL SERUM / PLASMA
TOXICOLOGY - DRUGS URINE SCREENING
URINALYSIS
VIROLOGY

Debra L. Bogen MD

Debra L. Bogen, MD, FAAP
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.

HEALTH NETWORK LABORATORIES
ELSIE S LEE, M.D.
794 ROBLE ROAD
ALLENTOWN, PA 18109