

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: 00022A

Name and Director of Laboratory:

**HEALTH NETWORK LABORATORIES
MAXIMO K. LLAUDES, M.D.
206 EAST BROWN STREET
EAST STROUDSBURG, PA 18301**

Owner:

HEALTH NETWORK LABORATORIES L.P.

ISSUE DATE: August 15, 2026

DATE EXPIRES: August 15, 2027

AUTHORIZED CATEGORIES/TESTS:

BACTERIOLOGY

CLINICAL CHEMISTRY

EXFOLIATIVE CYTOLOGY

HEMATOLOGY

IMMUNOHEMATOLOGY

MYCOLOGY

NON-SYPHILIS SEROLOGY

SYPHILIS SEROLOGY

TISSUE PATHOLOGY

Tissue Pathology Test 2

Tissue Pathology Test 3

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
MAXIMO K. LLAUDES, M.D.
ATTN: QUALITY DEPARTMENT
794 ROBLE ROAD
ALLENTOWN, PA 18109**