

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: 31134

AUTHORIZED CATEGORIES/TESTS:

Name and Director of Laboratory:

**CLINICAL CHEMISTRY
HEMATOLOGY**

**HNL ACL -1503 N. CEDAR CREST
CHUNHUA CUI, M.D.
1503 NORTH CEDAR CREST BLVD
ALLENTOWN, PA 18104**

Owner:

HEALTH NETWORK LABORATORIES, LP

ISSUE DATE: August 15, 2026

DATE EXPIRES: August 15, 2027

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.

**HNL ACL - 1503 N. CEDAR CREST
CHUNHUA CUI, M.D.
794 ROBLE ROAD
ATTN: QUALITY DEPT.
ALLENTOWN, PA 18109**