

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: 00010A

Name and Director of Laboratory:

LEHIGH VALLEY HOSPITAL - HAZLETON LABORATORY
JOHN P. BRENNAN, M.D.
700 EAST BROAD STREET
HAZLETON, PA 18201

Owner:

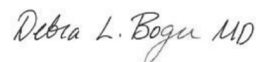
LEHIGH VALLEY HEALTH NETWORK

ISSUE DATE: August 15, 2026

DATE EXPIRES: August 15, 2027

AUTHORIZED CATEGORIES/TESTS:

BACTERIOLOGY
CLINICAL CHEMISTRY
EXFOLIATIVE CYTOLOGY
HEMATOLOGY
IMMUNOHEMATOLOGY
NON-SYPHILIS SEROLOGY
TISSUE PATHOLOGY
TOXICOLOGY - ALCOHOL SERUM / PLASMA
TOXICOLOGY - DRUGS URINE SCREENING
URINALYSIS
VIROLOGY



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.