

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: 00138A

Name and Director of Laboratory:

**GEISINGER LEWISTOWN HOSPITAL LABORATORY
WELLS M. CHANDLER, M.D.
400 HIGHLAND AVENUE
LEWISTOWN, PA 17044**

Owner:

LEWISTOWN HEALTH CARE FOUNDATION

ISSUE DATE: August 15, 2018

DATE EXPIRES: August 15, 2019

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**

**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.