

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: 40562

Name and Director of Laboratory:

HEALTHTRACKRX OF LOUISVILLE
SHALINI A. MURALIDHAR, PH.D.
706 E LEWIS AND CLARK PARKWAY UNIT 11
CLARKSVILLE, IN 47129

AUTHORIZED CATEGORIES/TESTS:

BACTERIOLOGY
MYCOLOGY
PARASITOLOGY
VIROLOGY

Owner:

HEALTHTRACKRX INDIANA, INC.

ISSUE DATE: August 05, 2023

DATE EXPIRES: August 15, 2024

Debra L. Bogen MD

Debra L. Bogen, MD, FAAP
Acting 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.