

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: 39027

Name and Director of Laboratory:

PRECISION PATHOLOGY SERVICES
ROBY P. JOYCE, M.D.
3300 NACOGDOCHES RD., STE 110
SAN ANTONIO, TX 78217

AUTHORIZED CATEGORIES/TESTS:

BACTERIOLOGY
CLINICAL CHEMISTRY
EXFOLIATIVE CYTOLOGY
HEMATOLOGY
MYCOLOGY
PARASITOLOGY
TISSUE PATHOLOGY
VIROLOGY

Owner:

ISSUE DATE: August 15, 2023

DATE EXPIRES: August 15, 2024

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.