

# 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: 34100

AUTHORIZED CATEGORIES/TESTS:

Name and Director of Laboratory:

TISSUE PATHOLOGY  
Cytogenetics

UNIVERSITY OF IOWA HOSPITAL AND CLINICS  
RICHARD J. H. SMITH, M.D.  
DEPT. OF OTOLARYNGOLOGY/MOLECULAR RESEARCH  
285 NEWTON ROAD, 5270 CBRB  
IOWA CITY, IA 52242

Owner:

ISSUE DATE: August 15, 2018

DATE EXPIRES: August 15, 2019

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.