

# 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: 033128



Name and Director of Laboratory:

MOUNT SINAI GENETIC TESTING LABORATORY  
LISA J EDLEMAN, PHD  
1428 MADISON AVENUE AB2-25  
NEW YORK, NY 10029

**AUTHORIZED CATEGORIES:**

BACTERIOLOGY  
CLINICAL CHEMISTRY  
EXFOLIATIVE CYTOLOGY  
HEMATOLOGY  
IMMUNOHEMATOLOGY  
MYCOLOGY  
NON-SYPHILIS SEROLOGY  
PARASITOLOGY  
SYPHILIS SEROLOGY  
URINALYSIS  
VIROLOGY

Owner:

MOUNT SINAI MEDICAL CENTER INC

ISSUE DATE: August 15, 2015

DATE EXPIRES: August 15, 2016

Karen M. Murphy Ph.D. RN  
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.