

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: 36072

Name and Director of Laboratory:

**BLOODWORKS RENTON
NANCY REBECCA HALEY, M.D.
701 SW 39TH STREET
RENTON, WA 98057**

AUTHORIZED CATEGORIES/TESTS:

BACTERIOLOGY

IMMUNOHEMATOLOGY

Transfusion Service

NON-SYPHILIS SEROLOGY

VIROLOGY

Owner:

BLOODWORKS

ISSUE DATE: August 15, 2019

DATE EXPIRES: August 15, 2020

**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.

**BLOODWORKS RENTON
NANCY REBECCA HALEY, M.D.
921 TERRY AVE, ATTN: QA
SEATTLE, WA 98104**