

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: 09003A

Name and Director of Laboratory:

MAYO CLINIC LABS-ROCHESTER MAIN CAMPUS WILLIAM G. MORICE II 200 FIRST STREET SW HILTON 530 ROCHESTER, MN 55905

Owner:

MAYO CLINIC

ISSUE DATE: August 15, 2023

DATE EXPIRES: August 15, 2024

**AUTHORIZED CATEGORIES/TESTS:** 

BACTERIOLOGY CLINICAL CHEMISTRY

EXFOLIATIVE CYTOLOGY

HEMATOLOGY

**IMMUNOHEMATOLOGY** 

MYCOLOGY

NON-SYPHILIS SEROLOGY

PARASITOLOGY
TISSUE PATHOLOGY

TOXICOLOGY - ERYTHROCYTE PROTOPORPHYRIN

URINALYSIS

VIROLOGY

Debra L. Boger 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.