

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: 00141A

Name and Director of Laboratory:

YORK HOSPITAL
MICHELLE ERICKSON, M.D.
1001 SOUTH GEORGE STREET
YORK, PA 17405

Owner:

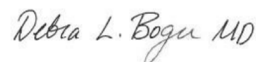
WELLSPAN HEALTH

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 - ALCOHOL SERUM / PLASMA
TOXICOLOGY - DRUGS SERUM SCREENING
TOXICOLOGY - DRUGS URINE SCREENING
URINALYSIS
VIROLOGY



Debra L. Bogen, MD, FAAP
Acting 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.

**YORK HOSPITAL
MICHELLE ERICKSON, M.D.
1001 SOUTH GEORGE STREET
YORK, PA 17405**