

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: 33055

Name and Director of Laboratory:

CLONGEN LABORATORIES
AHMED F KILANI, PH.D.
211 PERRY PARKWAY, SUITE 6
GAITHERSBURG, MD 20877

AUTHORIZED CATEGORIES/TESTS:

BACTERIOLOGY
MYCOLOGY
NON-SYPHILIS SEROLOGY
PARASITOLOGY
VIROLOGY

Owner:

DR AHMED F KILANI

ISSUE DATE: August 15, 2024

DATE EXPIRES: August 15, 2025

Debra L. Bogen MD

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.

CLONGEN LABORATORIES
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