

# 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: 34385

**AUTHORIZED CATEGORIES/TESTS:**

CLINICAL CHEMISTRY

TISSUE PATHOLOGY

Cytogenetics

**Name and Director of Laboratory:**

WASHINGTON U. CLINICAL AND MOLECULAR  
CYTOGENETICS

JONATHAN W. HEUSEL, M.D. PH.D.  
4320 FOREST PARK AVE SUITE 209  
SAINT LOUIS, MO 63108

**Owner:**

JUDY ELLESON, MBA

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.